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The “Jungle” Prevention Program for Parents: Structure, Principles and Potential Applications

ABSTRACT

A strong bond with parents is considered to be the most important factor for protecting children and adolescents against the use of psychoactive substances. At the same time, serious disturbances in the family relationships (e.g. violence) are objectively the reasons for the premature initiation and use of these substances. What can be done to strengthen this factor? Above all, this factor is composed of many elements that are worth emphasizing, because probably not all of them can be strengthened at the same time. There are components that require intensive action, but also those that can be activated and strengthened in a relatively simple way. In addition, the structure and content of the preventive program “Our Children in the Jungle of Life” (in short: “Jungle”), which was described in my book: *Our Children in the Jungle of Life: How to Help Them Survive?* published in 2016. Since then, I have tested the suitability of this scenario in working with adults in various conditions. It seems that it is very well received (positive results of the summative evaluation) and should be examined more thoroughly. In the article, I discuss the structure and principles of work using this scenario.

KEYWORDS

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Introduction

After over 40 years of research, there is a clear belief that a strong bond with parents is the most important identified factor protecting children and adolescents against the use of psychoactive substances (Hawkins, Catalano, Miller 1992; Ostaszewski 2014). A Polish field research (Ostaszewski, Rustecka-Krawczyk, Wójcik 2009) showed the significance of this factor as well. It comes as no surprise, therefore, that, for a long time, various forms of strengthening this bond have been sought to reduce the phenomenon of drinking alcohol, smoking or taking drugs. Probably no one needs to be convinced of how important it is to resist such behaviour. Of course, there are also researchers (e.g. David Foxcroft) who, against many educational failures in this area, try to find some positive aspects of e.g. alcohol consumption among adolescents (it is certainly impossible to find such aspects of smoking or taking drugs). However, they do emphasize that such behaviour is unacceptable among the adolescents under sixteen years old. Meanwhile, the average age of alcohol initiation in Poland is 12–13, as the majority of fifteen-year-olds have already experienced it (Ostaszewski et al. 2017). Therefore, we shall put aside any disagreements as of what the lowest age limit and the impact of adolescent alcohol consumption is, because the majority of experts approve of the necessity to promote complete abstinence until early adulthood or, according to the American experts, even until the third decade of life (the age of 21 as a legal age to have an access to alcoholic drinks, which used to be valid in Poland, too, according to the act of 23rd April 1920).

Where does such a restrictive opinion come from? Above all—from the knowledge of such risky behaviour's consequences. In the case of drinking alcohol, smoking cigarettes and taking drugs among youth, we know that the harm outweighs the benefits, and those damages are often serious (Anderson, Baumberg 2007). Undoubtedly, it is also a matter of initiating the addiction process, which usually develops in adolescence and early adulthood. A young person gets addicted much quicker comparing to older people. This is known in science as the telescopic effect (Hussong, Bauer, Chassin 2008). Interactions with ethanol may quite suddenly degenerate into addiction if young adults go beyond the level of just experimenting

with it. Addiction is therefore a threat, but not the only one and probably not the most considerable. Young people experimenting with psychoactive substances often experience accidents—it is estimated that even 25% of deaths of people aged between 15 and 29 is caused by alcohol consumption alone (Anderson, Baumberg 2007: 201–202). However, this is not everything. Young people may also experience health damage caused by the substances named above (all of which are highlighted in the leading 10 risk factors of premature death and loss of health list published by the World Health Organization (*The World Health Report 2002*)). Alcohol consumption is the main reason for health damage due to its accessibility and early initiation (Nutt, King, Philips 2010), which is often disregarded by adults. One should particularly consider the damage it may cause to the central nervous system. Drinking alcohol (and taking drugs) by children contributes to lowering the level of their intelligence. This is clearly unwanted by their parents, teachers, future employers, and by themselves. If they only knew how much they were actually losing, they would have certainly modified their behaviour. Unfortunately, it is not possible to directly notice this type of loss. However, other damages, such as untimely and random sexual initiation, being a victim of a sexual assault, violence, getting in conflict with the law, or other risky behaviours—are so noticeable and obvious that most of us consider it appropriate to restrict risky actions taken by children and adolescents.

Although not all children and teenagers are willing to perform dangerous actions being more than just experimenting (most of them do not take or even want to take such actions –see the reports from the Mokotów research or the ESPAD study (Sierosławski 2015; Ostaszewski 2017)), the scale of violating the standards makes us look for all the possible means and ways to eliminate, or at least reduce, the phenomenon of drinking, smoking and taking drugs by young people. How shall one obtain real preventive effects in this important matter? As far as smoking and taking drugs is concerned, we classify it to a higher-risk group, but alcohol consumption, which has become a modern-day plague, is almost a standard in today's world. This particular behaviour is described in the educational programme for parents presented in the book: *Our Children in the Jungle of Life: How to Help Them Survive?* It is an attempt to activate the strongest

known protective factor—the relationship with parents. Obviously, this factor has already been reinforced and the programmes based on its activation are the most effective preventive programmes (e.g. “Strengthening Families Programme, SEP” [Kumpfer, Alvarado 2003], or the family aspects of the “Project Northland” programme [Perry et al. 2002]). The author believes that there is never enough of this kind of attempts and efforts. However, the relatively small range of extensive programmes (Malczewski 2018) makes one search for more feasible, handier methods, e.g. shorter educational interventions (Wojcieszek 2013). A very short scenario prepared by Nikolaus Koutkai’s PhD and used in Sweden (Koutakis, Stattin, Kerr 2008) is an example of such a search. It was put into action in as many as one-third of the schools in Sweden. However, due to the lack of its unequivocally positive evaluation results, the programme is currently used less often. The Polish programme is similar, but it uses methods that make the presenters and participants more involved. Its nature is not solely educational, but it attempts to exert an active influence on the participants although it lasts only 75 minutes (of course, it might last longer, but usually external conditions do not allow it). Before we discuss its structure and principles, let us take a closer look at the issue of parental protection.

What is parental protection?

The researchers who investigate the role of this factor look for different components of protection. Krzysztof Ostaszewski’s studies are said to be one of the best works on this subject. He tried to examine the nature of this influence in an extensive monograph (Ostaszewski 2014). For the purpose of this article, there is no need to go as deep as Ostaszewski did. Let us simplify it by showing the following elements considered to activate the positive parental preventive impact:

1. emotional bond, parental support given to children;
2. parents’ monitoring of children’s behaviour;
3. parents’ demonstration of disapproval of risky behaviours;
4. taking active educational actions by parents concerning the use of psychoactive substances;
5. limiting physical access to psychoactive substances.

One can certainly find more similar elements, but this list is enough to show the actual purpose of the programme. It is worth analysing this list again and explaining the practical meaning of each of the listed items.

As for the emotional bond, one should particularly note that parental support is much more than just an emotional relationship. It is not right to reduce it to the emotional bond, because emotions, in a personal relationship, are only one of the components (Gogacz 1985). This issue is discussed in detail in the long texts included in different monographs (Wojcieszek 2005, 2010). It is therefore enough to highlight the difference between purely emotional aspects of a bond and the elements of a relationship. Of course, both features are important. The emotional factor allows a child to feel the parental support (relational components are not always identified immediately).

The second component has had good test results, e.g. in the “Strengthening Families Programme – SEP” or the Icelandic preventive project (Kristjansson, Sigfusdottir, Thorlindson, Mann, Sigfusson, Allegrante 2016; Milkmann 2016). Parents as the active supervisors of the children’s life and behaviours, instructed on what and how they should act, turn out to be quite effective prevention workers. Those who are for more liberal styles of parenting may find it strange, but it turns out that, without parental supervision, family love is not very effective.

One tends to pay less attention to the third factor, because somehow we do not believe that parents’ point of view on what children are allowed to do may actually affect the children’s behaviour. Does repeating: “do not/you must not” mean anything to a rebellious teenager? They do not listen to us, anyway... The truth is that children pay close attention to this kind of warning signals from their parents, as they want to be loyal to them. Such loyalty can reach very far, even—in a sense—to the time of adulthood.

The fourth factor requires the following from the parents: good communication with children; excellent knowledge of the areas that are the subjects of discussions with their children; as well as the right conditions (e.g. time). It comes as no surprise, therefore, that this preventive force is activated the least frequently.

The fifth factor includes various types of activities that prevent the children's physical access to addictive substances. An example of such prevention may be famous parental safeguards in American towns watching out for drug dealers. It is of great importance in Poland where many sale assistants still break the law by allowing the under-aged to buy alcoholic drinks. Parents, local communities and authorities have been struggling with this problem, but they have not been very effective. Nevertheless, it is a very important issue.

The programme in question mainly aims at reinforcing factors 3 and 5—those which are not very often used in “parental prevention.” Besides, the programme includes some aspects that seem not to be present in other suggestions, and which the author finds important, e.g. the level and quality of the relationship between the parents. The issue of the disintegration of the relationship as a risk factor is present in research analyses, but it is hardly ever taken into account in the preventive agenda. It is difficult to say why it is so, but we can suspect that it has something to do with the current cultural tendencies. This subject is intentionally taken up in the programme.

The formula of short preventive intervention in a group: why is it such?

The standards of preventive programmes recognize the necessity of work lasting several hours (10–15 sessions) so that the influence can be successful. This is particularly recommended for adolescents (UNODC 2015: 19). When it comes to adults, it is hard to imagine that most of them are subject to such a long influence. Such an optimum may happen when working with smaller groups, e.g. in the programmes for increased risk groups (e.g. the “Strengthening Families Programme” recommended by the researchers). An excellent “School for Parents and Educators” programme has been created and used in Poland (Sakowska 2008), but despite the preparation of thousands of lecturers, the amount of classes and the range of the programme are far too insufficient as compared to the needs. The author has repeatedly underlined the need for searching for shorter forms of exerting influence (Wojcieszek 2013), because the lack of such forms most often means the absolute absence of preventive actions. This rule also

applies to children and adolescents (the range of good programmes is still way too small) (Malczewski 2018), not to mention working with the parents. It is commonly known that, from a certain moment, a number of parents stop coming to the school building. Some of them do not attend the parent-teacher meetings, and if they do, they are mainly interested in their children's educational progress and formal results. The cooperation between parents and school is very poor in Poland. Teachers usually have to deal with the parents who are particularly demanding, and not with those who are willing to cooperate and participate in educational actions dedicated to them. It is almost impossible to see parents at school on occasions other than the parent-teacher meeting, especially when it comes to workshops related to alcoholism prevention (drug addiction workshops are a bit more popular, even though the level of drug use is significantly lower as compared to the level of alcohol consumption).

To sum it up, extensive preventive work with parents at schools is not a common practice for many practical reasons. Knowing the reality, the author of the programme (and this text) (Wojcieszek 2016) was trying to suggest an action that would be short, possible to carry out in a large group of parents, and acceptable for the parents. Conducting such actions in various groups of parents and in different schools has proven it to be possible. The script was technically effective and made it possible to take up simple actions that activated and involved the parents' preventive resources. This form of activity was also found attractive by most of them (Wojcieszek M., Wojcieszek K., Wojcieszek J. 2017) and gained a positive feedback in an *ex post* survey that is conventionally used and that includes the evaluation of the workshop. At the same time, the author's observation leads to the conclusion that the script is not as simple as it seemed to be at the time the program was formed. In order to carry out the workshop, the teacher must have some kinds of personal resources. Therefore, depending on a teacher and conditions, it is not always possible to implement the programme. It means that it is necessary to develop various forms of assistance for such implementation. A couple of ready-made multimedia presentations are available for teachers using the programme, but such aids are just plans for the future—perhaps near future.

Apart from the skills, the teacher's important resource is a constructive attitude towards a given risky behaviour in the sense of promoting abstinence among the youth. Studies have shown that Polish teachers have different opinions on this aspect. Some do not consider alcohol consumption by students to be as dangerous as it has been proven in the previously mentioned studies (Porzak 2019: 102–110). Such people must not conduct the programme with parents, because some of its fundamental objectives include encouraging parents to adopt more radical attitudes and not to accept the consumption of alcohol by children and adolescents.

It seems that, from a purely technical point of view, the programme is not very demanding for teachers. Most techniques applied in the programme are already known and used by them on a daily basis. The entire session lasts up to 75 minutes. A skilled teacher may only even need 60 minutes, which makes the programme suitable for a parent-teacher meeting. Also, the lecture-like nature of the programme allows the teacher to use it with a group of any size. The author of the article once carried it out in an auditorium, for the parents of the students of eight junior high school classes who attended a parent-teacher meeting. Therefore, the duration time and the size of the group to which the programme is dedicated facilitates the implementation of the programme in the real school conditions. In principle, the parents of teenagers (aged 12–16) are the target group. In terms of organization it means the parents of children attending the last four primary school grades and the first year of junior high school. However, there is actually no age limit, but the author suggests that it might not be sufficient for higher grade students and their development.

A brief description of the programme structure and strategies used

The programme refers to the metaphor of a jungle where one may easily get lost and die. The teacher-presenter defines the characteristics of a rainforest in terms of potential risks, and reveals various threats that can affect the listeners' children. He/she tries to present these phenomena as connected with risky behaviours. This part (as well as the entire course of the programme) should take the form

of a dialogue, using methods that will activate and involve the group (e.g. questions directed to a group), with the awareness of possible difficulties (with regard to the group size) with implementing certain methods.

Then, together with the group, the teacher creates the list of the most dangerous phenomena. At this point, the participants usually mention the usual, stereotypical behaviours (such as: performance-enhancing drugs (PED) use or a smartphone/computer overuse). The audience is usually shocked hearing that contact with alcoholic drinks is the most dangerous to their children. This allows the presenter to explain some of the main consequences (emphasising those that are not so obvious or commonly known) of early alcohol initiation. Parents are usually not aware of the extent of the damages caused by alcohol in the lives of young people.

The next step is explaining what the reasons for alcohol consumption among youth are. This is usually done in a form of a simplified brainstorm the results of which are commented. At this stage, the parents regain initiative and accurately indicate the situations in which their children may reach for alcohol. The presenter sums it up and names other advantages of drinking that young consumers may see, as well as the reasons why drinking is so appealing to them. It is fundamental that the parents understand the importance of this context. Otherwise, they will not find the common ground with their children as for this issue. However, it must be clearly said that there are too many damage-causing factors related to drinking, which makes it impossible to treat it as “a personal development accelerator” and something that facilitates integration with the group of peers. There are better and safer ways to reach this important developmental goal.

It is also important to point out the negative role of widely-spread marketing of alcoholic drinks. Using various methods, the producers of such drinks try to gain new customers regardless of their age. Another topic that may be interesting to the audience is related to young people's existential problems (reflected in, e.g., the high suicide rate), such as loneliness, isolation, depression or despair (Gogacz 1983; Wojcieszek 2005). What is difficult but bearable for an adult may seem a catastrophe for a child. Parents are often unable to recognize their children's first signs of depression.

At the next stage, the group should try to find the answers to the question: “What does really protect young people?” The parents are shown the list of actual protecting factors (Hawkins, Catalano, Miller 1992; Wojcieszek 2005). They usually notice that they underestimated or failed to know some of them, e.g. religious practices (Rew, Wong 2006; Wong, Slaiken 2006; Malczewski 2017), and, in particular, their own role as the most important protective factor.

To highlight the importance of their role, the teacher presents a simplified theory of parental relationship. In this context, he presents the connection between the parent’s style of upbringing and the children’s risky behaviours. Then, the participants are asked to figure out which of the presented parenting styles (which differ in terms of support and requirements, i.e. setting the rules and boundaries) is the best from the point of view of child protection. It turns out that most parents answer properly and indicate the style: “to love children, but also require a lot from them” (Sakowska 2008). Firm support and, at the same time, setting reasonable boundaries to children, turn out to be the best approach. The presenter encourages the parents to require avoiding risky behaviours from the children. The workshop ends with a very significant “drinking prevention decalogue” and a praise for the parents who participated in the programme, showing how much they care for their children. In the course of the lecture, drinking alcohol as a social norm is questioned by the presenter who lets the participants know that—with regard to children and adolescents—it is unacceptable. Probably the best way to reveal the nature of the above education is to have a closer look at the “decalogue” which will now be discussed.

The “alcohol decalogue,” including the author’s comment

In the script publication we can find a summary in the form of the “alcohol decalogue” (Wojcieszek 2016: 97). I will now briefly refer to its contents. The “decalogue” is my own idea and I will comment on it to explain my intentions. As far as I know, this set of guidelines is the first of such kind, but maybe someone else had also prepared a similar form of an abbreviated educational aid for parents. Being unable to verify it, let us accept it to be the original approach. The “alcohol decalogue” is as follows:

Love each other! Your children are the most sensitive seismographs!
 Make your children feel loved—home environment should be full of trust, kindness and acceptance.
 Make sure your children know how you wish them to behave.
 Make sure your children also know why you have such requirements.
 Make a list of “home rules” and be consistent.
 Make sure you are a good example for your children. If you smoke, get drunk or overuse pills—they see and imitate you.
 Watch out for those who want to steal your children from you, i.e. the business supporting risky behaviours.
 Cooperate with those who offer you help, e.g. with the teachers of Education for Family Life.
 And then your children will be safer.

In the quoted publication (Wojcieszek 2016: 97–102) there is an explanation for each of the above mentioned points of the decalogue, but here we will only make a short comment on them. The first point applies to the following observation: if there is a family crisis (especially the parents’ breakup) at a student’s home, it is almost immediately reflected in the child’s behaviour. Such a child is automatically classified to the increased risk group. If you ask experienced teachers of what, in their opinion, causes the students’ behaviour problems, they will surely point to the students’ family problems—violence, alcoholism, relationship breakup, divorce. Children try to counteract the crisis in their own way, even at the cost of their own losses. They try to draw others’ attention to their own troubles, hoping that this will heal the situation at home. Even if they do not take up such actions, the main risk factor—despair remains. A number of publications deal with this topic. Let us, therefore, only mention that the crisis of relations is the principal factor of risky behaviour, as it destroys one’s self-defence motives (Gogacz 1983; Wojcieszek 2005, 2010, 2013). The existence of a mutual bond between the parents guarantees a child’s sense of safety. Therefore, the child constantly (and unconsciously) supervises it. Just like we constantly observe meteorological conditions, the child continuously monitors whether her/his parents love each other.

If the above statement draws the prevention specialists’ attention, it is mainly in terms of a *harm reduction* strategy. The strategy aims to reduce the children’s possible suffering caused by their parents’ relationship breakup. There are constant attempts to construct

and implement suitable programmes to help the children after such breakups, but there are no attempts to prevent the crisis itself. One day, there was an opportunity to talk with one of the authors of such programmes implemented in North Rhine-Westphalia (Germany). Someone said that it was more important to prevent relationship breakups than work on harm reduction. The answer was that nothing can be done in this aspect as the divorce percentage shall certainly increase (as it has been happening in Germany for many years). What a surprising pessimism, especially because it is still up to the people who are in relationships to decide what to do while facing a crisis. It is important that parents know what the essential condition to protect their children is. A strong family is the key. The responsibility of protecting a child is extremely difficult for a single parent.

Commenting on the second point, we may say that it is a typical issue (Ostaszewski 2014: 96–98). A new element consists in emphasizing the aspect of making the children feel loved, not only loving them (which is usually true). Love must have its “communication channels.”

The third point corresponds to a strange belief of some parents that the children can read their expectations using some sort of telepathy. The truth is that many of such expectations must be clearly communicated to the children. It is even more important that such parental rules or boundaries are supported with an understandable explanation expressing the parental concern. Such explanation is also a good opportunity to discuss drinking alcohol, smoking and other important topics with the child.

In the programmes based on parental influence (e.g. SFP), the importance of various child–parent arrangements is underlined. Writing agreements or “family contracts” is promoted. This point refers to the practices which apparently worked well in the Icelandic project aimed to reduce getting drunk by fifteen-year-olds (Kristjanson et al. 2016), although with some restrictions (Wojcieszek 2017).

The next commandment of the decalogue draws the parents’ attention to behaviour modelling. The most powerful model is the one represented by the closest family. It may happen that the child’s close environment does not follow the attitudes suggested in preventive programmes (e.g. someone gets drunk). In such a situation, because of the lack of coherence between verbal communication and

the adults' behaviour, even if preventive projects contribute to some positive changes of a young person, after a while everything goes back to the previous state (Perry 2002).

The next point refers to limiting the influence of alcohol business and other similar activities. It is not true that parents have a very small influence on the business reality. First of all, they can supply the social control factor in, e.g., the sale of alcohol to the under-aged. If we reproved the shop assistants who break the law in our presence more often, they would gradually limit such practices. No other solution is more powerful than the social control factor. The Polish law is formally very strict. Officially, there is a penalty of loss of permission for selling alcohol (apart from other legal consequences) even for a single incident of proven alcohol sale to an under-aged person. Meanwhile, over a half (perhaps even more than two-thirds) of shop assistants break the law, destroying the efforts of parents and prevention specialists (Sierosławski 2015: 69–73).

The last commandment draws our attention to the necessity of forming an educational coalition between parents and children. Why should the teachers of Education for Family Life be particularly involved in this action? Because there is a record showing the significance of maturity not only in sexual behaviour, but also in using psychoactive substances. For example, the “Treasure Archipelago” programme which aims at the teenagers' sexual restraint, also contributed to limiting the use of psychoactive substances, even though, in this project, this topic is discussed to a minor extent (Grzelak 2009: 244–246). This empirical result confirms the integrated prevention model.

As we can see, the discussed catalogue, apart from the well-known issues, includes some aspects which are not much exposed (or almost absent) in the modern world's culture and style of being, but—in the author's opinion—they are very important. Without taking into account such aspects, the effort to activate parental prevention will probably remain ineffective.

Do words mean anything?

The obvious question is whether working on the proper parental attitudes, that are to be reflected in adequate messages given to the young, has any meaning? Do the orders given by parents or their non-acceptance of risk mean anything? We could say that a parent says one thing, and the child does the opposite, anyway... Obviously, the formula that combines an intensive workshop and learning various skills is “an option to select,” if possible. The author believes that it would be better to invite parents to participate in the “School for Parents and Educators” where prevention specialists can work with them longer and more effectively. There is no doubt about it, but the range of serious forms of prevention is too low and it will probably remain at this level.

Maybe it is not worthwhile to discuss such aspects until a possibility to undertake more ambitious and wide-ranged actions arises? On the contrary—even such short forms (if well developed) have an influence on the social reality. There is some indirect evidence of the significance and influence of parental opinions on drinking alcohol on its actual level of consumption by young people. This indirect evidence has recently emerged during a study on an interesting phenomenon, i.e. a decrease in the level of alcohol consumption by young people in many countries (USA, Australia, Scandinavia, Poland). A comparison of the situation in Sweden and Denmark (Ramstedt, Larm, Raninen 2019) is particularly remarkable. The two countries are quite similar in terms of the social situation. A number of positive changes has recently been recorded in Sweden (e.g. a high increase of teenage abstainers), which, however, is not happening in Denmark. The only difference between those countries that was indicated by the researchers was the level of parents’ restrictiveness towards their children’s alcohol consumption. Swedish parents are more strict in this aspect than those from Denmark. The parents’ approach to drinking alcohol by young people from those countries may be one of the reasons for the way the youth actually behaves.

Taking such argumentations into account, it seems that even short workshops that strengthen the parents’ critical attitude towards drinking alcohol by adolescents, can be of practical importance. It is obviously not easy to subject this type of impact to evaluation tests,

which was confirmed by the long debate over a possible success or failure of the educational programme (now carried out in Sweden) written by Koutakis from the Örebro University (Bodin, Strandberg 2011). At this stage of work, we can only hope that such programmes shall be effective, which—in the author’s opinion—is very probable.

Conclusion

Those who are interested in the details of the programme structure should refer to the book which is dedicated to this programme (Wojcieszek 2016). The book was written in compliance with scientific knowledge, but also with the intention of promoting the content of the programme. This combination makes the language of the book communicative, which is confirmed by the readers’ feedback. The programme itself clearly requires further research and improvement. The subject of the participants’ possible change in their attitudes towards alcohol is particularly interesting, although it is difficult to examine because some effects may occur over a longer period of time. It is also difficult because of its relatively short exposure time. At the moment, we can only say that the programme has a high educational effectiveness and it is welcome by the recipients. We hope for the script to be an extension of the actions addressed to students. This is the form in which it has been used by the author, especially in Łuków and in Zielonka near Warsaw. The experience gained from the use of this programme is very promising.

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