

# SCHOOL-FAMILY PARTNERSHIP IN THE PREVENTION OF ADDICTIVE BEHAVIOUR IN ADOLESCENTS

*Mihaela RĂDOI\**

## **Abstract**

Contemporary society has come to appreciate the beneficial effects of parents' active participation in school life. Numerous studies have highlighted the decisive influence of a qualitative relationship between parents and children, parents/family and school upon children's education (Irimescu 2010). In Romania, the National Education Law no. 1/2011 mentions that parents are considered principal partners and beneficiaries of the educational process. This study is based on the analysis of over 60 interviews conducted with form teachers within high schools of Iași. The topics concerned the following aspects: substance use; frequency of use; age of onset; substance use locations, in association with socio-demographic characteristics (gender and age, educational background, place of residence, and marital status); influence of risk and protection factors (drug accessibility and availability, family use and parents' attitude towards children's use, parental authority and involvement in children's education, influence of the entourage, relationship with school/peers, involvement in curricular and extracurricular leisure activities, drug knowledge, perceived consequences of drug use, and opinions on drug use). This study focuses on both the difficulties that teachers encounter in their relationship with the family of a student who uses substances and their ambivalence when intervention is required. We have noticed an externalization of substance use issue in school; furthermore, teachers tacitly accept substance use behaviours.

**Keywords:** school, family, substance use, risk factors, protective factors, intervention.

## **Résumé**

La société contemporaine a commencé à apprécier les effets positifs de la participation active des parents dans la vie des écoles. De nombreuses études ont mis en évidence l'influence décisive d'une relation qualitative entre les parents et les enfants, les parents /la famille et l'école sur l'éducation des enfants (Irimescu 2010). En Roumanie, la Loi de l'Éducation Nationale n° 1/2011 mentionne que les parents sont considérés les principaux partenaires et bénéficiaires du processus éducationnel. Cette étude est basée sur l'analyse de plus de 60 interviews déroulées avec des professeurs principaux qui enseignent chez de différents lycées de Iași. Les thèmes ont compris les aspects suivants: l'usage de substances; la fréquence de l'usage; l'âge de début; les lieux de l'usage, en association avec les caractéristiques sociodémographiques (le sexe et l'âge, le niveau éducationnel, le milieu de vie et le statut familial); les facteurs de risque et de protection (l'accessibilité et la disponibilité de la drogue, l'usage en famille et l'attitude des parents vers l'usage de la part des enfants, l'autorité parentale et l'implication dans l'éducation des enfants, l'influence de l'entourage, la relation avec l'école/les collègues, l'implication dans des activités scolaires

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\* Associate Professor, Department of Sociology and Social Work, Faculty of Philosophy and Social-Political Sciences, "Alexandru Ioan Cuza" University of Iași, Carol I 11, 700506, Iași, Romania; e-mail: radoi.mihaela73@gmail.com; tel. 0745953809.

et extrascolaires de loisir, les connaissances sur les drogues, la perception des conséquences des drogues et les opinions sur l'usage des substance). Cette étude se concentre autant sur les difficultés rencontrées par les enseignants dans leur relation avec la famille d'un étudiant qui use des substances, que l'ambivalence des enseignants lorsqu'il s'agit d'intervenir. On a observé une externalisation du sujet de l'usage des substances à l'école; encore plus grave, les enseignants acceptent de manière tacite le comportement des étudiants qui usent des substances.

**Mots-clés:** école, famille, usage des substances, facteurs de risque, facteurs protectifs, intervention.

### **Rezumat**

În societatea contemporană se apreciază tot mai mult efectele benefice ale participării active a părinților în viața școlii. Numeroase cercetări au pus în evidență aspectul determinant al calității interacțiunii dintre părinți și copii, părinți/familie și școală asupra educației copiilor (Irimescu, 2010). În România, conform Legii educației naționale nr. 1/2011, părinții sunt considerați parteneri principali și beneficiari ai procesului de învățământ. Studiul se bazează pe analiza a 60 de interviuri realizate cu profesori diriginți din liceele municipiului Iași. Temele de discuție au fost axate pe următoarele aspecte: consumul de substanțe, frecvența consumului, vârsta de debut, locații de consum, asocierea cu caracteristicile sociodemografice (sex și vârstă, nivel de școlarizare, mediul de rezidență și situația familială), influența factorilor de risc și de protecție (accesibilitatea și disponibilitatea drogului, consumul în cadrul familiei și atitudinea părinților față de consumul copiilor, autoritatea părinților și implicarea acestora în educația copiilor, influența anturajului, relația cu școala/colegii, implicarea în activitățile școlare și extrașcolare de petrecere a timpului liber, cunoștințele despre droguri, percepția consecințelor urmare a consumului și opinii cu privire la consumul de droguri). Studiul aduce în atenție dificultățile pe care profesorii le întâmpină în relația cu familia elevului consumator de substanțe dar și o ambivalență a acestora în cazurile în care se impune intervenția. Putem vorbi de o externalizarea a problemei consumului de substanțe din spațiul școlar și chiar de o acceptare tacită a unor comportamente (asociate consumului) din partea profesorilor.

**Cuvinte cheie:** școală, familie, consum de substanțe, factori de risc, factori protectivi, intervenție.

## **1. Substance use among young people**

Almost a quarter of the adult population in the European Union, or over 80 million adults, are estimated to have consumed illicit drugs at some point in their lives. In most cases, they have used cannabis (73.6 million), but lower estimates are reported for lifetime use of cocaine (14.1 million), amphetamines (11.4 million), and ecstasy (10.6 million). Level of lifetime use vary significantly between countries, from approximately one third of adults in Denmark, France and the United Kingdom, to less than one in 10 in Bulgaria, Greece, Cyprus, Hungary, Portugal, Romania, and Turkey. (EMCDDA 2014)

On European level, the average proportion of students having tried illicit drugs increased from 11% in 1995, to 17% in 1999, and to 20% in 2003. The figures then

decreased slightly in 2007 to 18%, and it has remained the same in 2011. In exchange, unlike the European trend, the prevalence trend of lifetime use of illicit drug use among Romanian students has dropped from 10% in 1999 to 3% in 2003; in 2007, it increased to 5%, while in 2011 it reached 10%. (ESPAD 2011, p. 134) As for gender distribution on European level, the ascending drug-use trend between 1995 and 2003 involved both boys and girls, though average figures may be higher in case of boys. On average, 21% of the boys and 15% of the girls have tried illicit drugs at least one in their lifetime (ESPAD 2011, p. 134). According to the 2011 European survey, Romania is among the few States within the study that no longer records significant differences between boys and girls concerning the lifetime-prevalence rates: 11% for boys and 9% for girls.

In 2013, upon an initiative of UNICEF, The Urban and Regional Sociology Centre – supported by the Education Sciences Institute – conducted a study titled “Status of Romanian Adolescents.” The authors of this study posit that 3.8% of the responding adolescents have tried a type of drug at some point in their lives. At the same time, when they considered only adolescents aged between 14 and 18, the authors concluded that lifetime prevalence is 5.4%; when they considered only urban adolescents aged 14 and older who have tried a type of drug at some point in their lives, the prevalence was 7.5%. I note below some of the conclusions posited by the authors (Abraham *et al.* 2013):

- 2.3% of the adolescents reported having tried cannabis, 1% ecstasy, 1% new psychoactive substances (also known as “ethnobotanicals”); 1% took sleeping pills, 1% sedatives, 1% hallucinogenic substances and 1% inhalants.
- Drug use seems to be more common among boys, while the use of sedatives, sleeping pills and antidepressants among girls.
- Drug use is lower in adolescents aged between 10 and 13 compared to those aged between 14 and 18. The highest lifetime-prevalence rates among adolescents within this category are recorded for inhalants, hallucinogens, sedatives/tranquilizers, and sleeping pills (0.8%).
- among adolescents aged between 10 and 13, the highest lifetime-prevalence rates are recorded for crack and sleeping pills, respectively (0.5%).
- None of the respondents under 14 has ever tried heroin and only 0.3% of the older ones have used this type of drug.

The findings of the national study within ESPAD 2011 rank Romania among the bottom 10 European States in the use, at least once in their lives, of illicit drugs by 16-year olds. For all types of illicit drugs, Romania is below European averages. At the same time, compared to the previous study, Romania is among the 11 European States that recorded significant increases in illicit drug use among 16-year olds, along with France, Monaco, Latvia, Poland, Hungary, Portugal, Finland, Greece, Cyprus, and Montenegro.

## **2. Design of the study. Method, sample, data collection instruments**

This research is qualitative and it uses semi-structured interviews. I have chosen this research technique because it can cover all the aspects of the research by providing information – from teachers’ perspective – on the types of relationships established between teachers and students, between teachers and parents, but also concerning inter-institutional collaboration on the topic of substance use. The interviews were conducted face to face, based on an appointment between the interviewee and the researcher. The interviews lasted between 60 and 90 minutes. After signing the informed consent form, the interviews were recorded, transcribed verbatim, and submitted to thematic analysis. The sampling is theoretical; the criterion taken into account was for the teachers to be form teachers in high schools. I interviewed 60 persons (form teachers in high schools of Iași). The mean age of the respondents is 39. Their teaching experience varies between 1 and 26 years. The interview focused on the following aspects: frequency of use, age of onset, substance use locations, association with sociodemographic characteristics (gender and age, educational background, place of residence, and marital status), influence of risk and protection factors (drug accessibility and availability, family use and parents’ attitude towards children’s use, parental authority and involvement in children’s education, influence of the entourage, relationship with school/peers, involvement in curricular and extracurricular leisure activities, drug knowledge, perceived consequences of drug use, and opinions on drug use).

## **3. Family and school involvement in substance use prevention.**

### **Analysis from the perspective of Iași-based teachers**

According to Article 80 of the Education Law, all major decisions in pre-university system must be taken after consulting the representative associative parents’ structures. National Education Law grants parents the right to participate actively to the administration of educational establishments, by being part of the schools’ directorial boards (Article 96), by becoming involved in the elaboration of the educational offer provided by the educational unit in question, and by participating to the curriculum for Afterschool. This study underscores that just a few parents actually become involved in the educational process, because they consider that mainly school should cover this aspect.

### ***Magnitude of the phenomenon***

Concerning the magnitude of the phenomenon, the proportion of teachers who appear worried concerning the increasing number of students who use substances is 89%. However, when asked whether the school they taught at included students who used such substances, most of them reported not being aware of any specific

case or having had a case several years before. They also reported that the number was not worrisome, but that they acknowledged such issues in other schools or concerning their own students in their free time, when either the students themselves or their family are in charge. We have actually noted an externalization of substance use issue in school; furthermore, teachers tacitly accept substance use behaviours.

Whereas aware of the magnitude of the phenomenon and of the substance-use cases in their schools, teachers fail to admit this issue openly. When asked whether there are users in their high school, the answers of the 60 teachers interviewed varied between “Yes, I am more than 50% sure that they consumed alcohol within or outside school premises. I regret to say this, but alcohol and cigarette consumption is considered as normal as it gets for young people nowadays and ... they are not even embarrassed when you catch them smoking or drinking alcoholic beverages” (Mathematics teacher, 52 years old).

“I am not aware of any case; however, there must be some respect for this establishment, so they probably do it in special places, bars, clubs, at least those with enough money to access these places. The others must do it in hidden places, in the dark, because these are nighttime activities, I mean peripheral activities. They probably do it in parks, behind blocks, to each his own, I guess, depending on the entourage” (Physics teacher, 55 years old).

Fifteen out of the 60 teachers interviewed know of students who consume, but in the other classes, not where they are form teachers. “In the classes I teach, I know no such cases, but there students in this school who smoke or drink. According to school regulations, they are not allowed to smoke in the schoolyard, but this would mean sending them on the streets where more dangers await, so we do close our eyes from time to time. As for alcohol... zero tolerance” (Mathematics teacher, 41 years old).

Teachers who admit having knowledge of such cases (22) state that they happened several years before or that such cases are isolated. “During various activities such as proms or excursions, I saw students smoking or drinking alcohol, but I do not see it as a problem. Only rarely do students come to school intoxicated; I would say smoking is the vice of choice, but they smoke outside school premises, near the gates” (Geography teacher, 37 years old).

I underscore again the externalization of this issue from the school space. Only two of the teachers interviewed admit this phenomenon. From their perspective, parents are the ones to “blame”; however, it has become apparent that teachers and students are in complicity, at least when it comes to smoking in the vicinity of school premises.

“On high school premises I am not aware of such situations, but outside school premises each person is ... in charge and as teachers we cannot possibly know what happens in their groups” (Physical Education teacher, 38 years old).

### *Determining factors of substance use*

As for the causes pushing students to consume various substances, teachers believe that they are mainly influenced by entourage (52) and family background (52), because of lack of parental control (15) or given family history of consumption.

“Education received at home, parents abroad; some parents even come to school intoxicated, so you understand where the problem originates” (Sociology teacher, 40 years old).

Curiosity, entourage determine them to consume because they believe they are cool, “strong,” and that booze is a sign of manhood. “On the other hand, maybe [such behaviour] is caused by excess money from their parents, or maybe somebody in their family drinks. Other causes can be curiosity, boredom or low self-esteem, depression. For rural students, habit is also important, because since they were little, parents gave them a taste of wine or *țuica*, because ‘they itched for it’ and such tasting may lead to a habit” (Geography teacher, 38 years old).

### *School/family relationship*

An important role in prevention must be ascribed to family. Concerning its involvement, the respondents mentioned only two programs that concern parental skills development. Most of the times, family is merely informed regarding the existence of consumers in school; thus, there is no active implication from the part of families. When asked regarding the relationship developed with families throughout school years, teachers replied unanimously that the relationship is satisfactory where there are no issues, but even in such cases, very few parents are actually interested in their children and come to school without being summoned. “In problem-cases, families are also problematic, so the relationship is practically absent” (Religious Education teacher, 36 years old).

Parents usually come to school when they called for parents’ meetings. All teachers reported having special hours dedicated to meetings with parents, but that parents do not use them. “...parents come to school only if we ask them to; many times not even then...” (Mathematics teacher, 35 years old). “Besides parents’ meetings organized two or three times a year, parents are not interested in their children. Parents are the only ones responsible, because they fail to care for their children” (English teacher, 35 years old).

On the other hand, concerning the parent/child/school relationship, when risk behaviours were pointed out, teachers highlighted the following:

- Either parents represent consumption models for their children or they show zero interest for them. “Some parents will thank you for your dedication; they are willing to collaborate with the school to make things better, but some other parents are in denial and they see this situation as their failure as parents. It is sad that some parents choose to deny than to solve these problems” (Music teacher, 26 years old)”.

- Parents accuse the school for what happened. “When more serious issues emerged, we called the parents to school or I went to their residence myself, we talked and that was all. Why? Because parents – and I know this is the old-school teacher in me talking again – nowadays get mad and defend their offspring to the bone. Very few parents actually get involved and conduct an intervention when they learn of their child starting to turn the wrong way.... [They say] that the teacher is set against the child and this is the reason for lowering the conduct grade and for calling them to school...” (Mathematics teacher, 54 years old)”.

The respondents often mention that parents become helpless or revolted. “The mother’s reaction took us by surprise; she told us that she had to go to work and that she could not do much by coming to school. She came, slapped the boy and then left. Family support is slim to the best. Many children smoke at home, along with their parents... so what more can we do? In some cases, parents are aware of it but choose to do nothing. You can’t live in the same house as your child and not realize that s/he has been drinking or smoking” (Mathematics teacher, 51 years old).

“All the time, parents who have a problem-child have no time at all for the child; I believe this is the cause; they were simply allowed to do anything, without any control; nobody ever asked them about their whereabouts. I believe that having a conversation with such a parent could be a starting point in solving the problem” (Computer Science teacher, 35 years old).

### *Intervention in school*

As for intervention itself, teachers believe that the active implication of parents in children’s education, sanctions applied to those who sell drugs to minors, as well as the active implication of young people in extracurricular activities and campaigns, as well as raising awareness on substance use effects by presenting concrete cases may represent effective ways to optimize intervention programs.

As far as children are concerned, studies report that the most vulnerable periods are those of transition, when they pass from one developmental stage to another (Hawkins *et al.* 1992). The first major transition period is the one of leaving the protective environment of the family and starting school life, where they are to make new friends. The passage from middle school to high school and then from high school to college entails new social confrontations, such as the need to adjust to a larger group of peers. During this period, students are more prone to experiencing the effects of drugs for the first time. The prevention factor is crucial at this point. Hence, discussions held with the teachers show that each school organizes programs meant to inform, leave a mark, and make students aware of substance use and of their effects. “Our school wishes to prevent such acts; we have zero tolerance for the acts committed on school premises, but zero tolerance does not entail drastic measures such as school expulsion for the student in

question; we try to understand the situation and to provide help. The student can get counselling in school, parents are called to school; conversations take place with the teacher, the parents and the student. We approach these issues during the homeroom class” (Music teacher, 26 years old).

Prevention activities are conducted either by direct implication of the school (through teachers, form teachers, school counsellor/psychologist) or by involving the students themselves (school journals, student clubs, students’ extracurricular activities). Such activities can also be conducted by collaborating with local authorities, NGOs, State institutions (especially police), the Church, and by taking part in the national programs organized by the National Antidrug Agency. Within this activity, the most important part is to inform students during homeroom class and to collaborate with the NGOs that conduct activities specific to substance use prevention.

“Besides specific activities in school, during homeroom classes, many activities are part of national prevention programs in schools, organized by the NAA in collaboration with the Ministry of Education, Research, Youth, and Sport, with County School Inspectorates, with County Psychopedagogical Centres, with County Public Health Authorities, City Halls, County Police Inspectorates, Proximity Police, Foster Care Centres – General Social Work and Child Protective Services, Cultural Centres, County Youth and Sport Directorates, and the Ministry of Internal Affairs” (Sociology teacher, 40 years old).

Prevention programs can increase the influence of protective factors on children by educating parents to communicate better in the family, to establish firm and precise rules, and to develop parental skills. Studies (Olaiu 2001) report that parents must assume a more active role in their children’s lives; they should talk to them about alcohol, smoking, and drugs; they should monitor their activities, get to know their friends, and try to understand their problems. For many parents such mission may prove delicate, because they consume such substances themselves. “I believe that most of the times families only exercise their economic function, by neglecting intentionally or unintentionally the control and advising function they should exercise with their children” (Geography teacher, 38 years old). “Usually, we have the best relationships with parents whose children have no problems. Most of them came at the beginning of the school year for the social program called ‘money for high school’, but then they vanished. It is a shame that parents forget about their fundamental role. Maybe social reality also drives them to forgetting [their role]” (Humanities teacher, 51 years old).

While talking about prevention programs in school, conducted through other institutions, teachers believe they can have a positive impact only if students and their families become involved to the same extent. Their perception is that these programs are not effective and that they should be implemented to younger students, who have not yet begun consuming such substances.



“I don’t know how much attention students paid to such programs, but I believe that the best prevention method under such circumstances is the relationship between parents and students” (Geography teacher, 57 years old).

At the same time, most teachers report again that family role is primordial. In this sense, teachers propose the following: control of the financial resources provided to children by parents, but also monitoring of their entourage. For a better collaboration between students, teachers, and parents, the respondents believe programs should be implemented to inform parents on the age particularities, the needs and problems specific to their children. In this sense, programs such as “Parents’ school” or “Are you ready for your child?” seem a viable solution. “The impact was positive; many students understood there are other ways to be *cool* (in their words); through the program conducted with parents, we wished to improve their educational skills by organizing meetings meant to strengthen family relations, to clarify the family’s stance on drug use” (Romanian Language teacher, 35 years old).

A better leisure time management by getting students involved in extra-curricular – mainly sports – activities is a measure that teachers consider beneficial for the reduction of risk factors. “[I can think of] getting students involved in extracurricular – mainly sports – activities. Closer collaboration with the family education provided to parents, parental control. We may try to tell them it is not good to smoke and drink, but if they smoke and drink at home with their mum and dad, all our talking is in vain (Art teacher, 36 years old)”. Such informing activities must start early. As for high school students, they are more influenced by campaigns that move them and make them aware using concrete examples. Teachers propose to involve in such campaigns former substance users and to change the focus of these campaigns taking into account the urban or the rural background.

“[I am for] tougher rules in school, securing school space, forbidding any exits from school without justifying grounds, making parents responsible, getting other institutions involved; everybody in school says that these should be done, that legislation should change” (History teacher, 57 years old).

“Community police could monitor parks, because students seek refuge there. In addition, town police could check more often the age of young people drinking alcohol in certain bars, mostly during classes; they could take measures concerning this aspect” (Geography teacher, 47 years old).

#### **4. Conclusions**

The importance of an effective collaboration between school and family for children’s academic success has already been acknowledged. This framework enabled authorities to support the need to strengthen the relations between parents and school and to promote them as public policies. In the current context, these

relations are more necessary than ever, considering that many parents are mostly concerned with family, professional, or social issues (Ionescu et al 2014), to the detriment of their child's education (they fail to follow the coherence between education provided by the family and the one offered by school).

Literature review (Bernard 1991) shows a significant role of parents' involvement in the collaboration with school concerning children's development and education, as well as advantages for parents, teachers, and the community. However, practice reports that public schools – mostly those in disadvantaged areas (Mionel 2011) – still foster cultural, psychological, and social barriers that block the collaboration between school, family, and community, to the detriment of children's best interests. Both teachers and young people agree that – besides institutions and measures to make prevention and drug use campaigns effective – family could actually play the decisive role. Teachers believe that informing parents and involving them in parental skills development programs, better collaboration between parents and teachers, as well as higher parental control may represent ways to solve substance use issues. Most teachers believe substance use causes include family background (52 of the 60 teachers interviewed) and the existence of negative models in the family (15 answers), followed by entourage and curiosity. A study on the factors and processes increasing the risk of substance use (Blas and Kurup 2010) or protecting against it reported a series of major protective areas of intervention: protective intervention; relationships within the family; relationships within the group of peers; school environment; relationships within the community. Each of these areas of interest may represent the framework of drug prevention activities, by developing social skills and personal competences, by raising awareness on health dangers, and by highlighting the social and psychological consequences entailed by substance abuse. Such services must be specific to adolescents, based on a holistic approach that includes appraisal, case management, individual counselling, support groups, skills development, education, family therapy, assistance in career building, and establishing contact with groups and institutions able to provide support. An effective interaction between family and support institutions staff is essential for the reintegration of young people.

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