Partnering with Teachers in the Delivery of a Classroom-Based Universal Socio-emotional Intervention Program in Urban Elementary Schools

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PRESENTATION OBJECTIVES

Participants will:

• Gain information about Incredible Years, an evidence-based intervention designed to improve outcomes for high-risk urban youth.

• Learn the planning and implementation process for developing collaborations with teachers.

• Learn how to use tiered graduate student practicum experiences to increase fidelity and generalization of the intervention within classrooms.

BACKGROUND – KIDS NEEDS

• Behavioral health and socio-emotional needs of low income, minority children residing in urban areas are often overlooked:
  - results in serious long-term negative consequences that include behavioral and emotional disorders (Raver, 2002).

• African-American youth, in particular, are considered the most underserved population with respect to behavioral and mental health services (Lindsey, Green, & Thomas, 2004).

• When services are provided, they are rarely evidence-based, and not always culturally sensitive.
BACKGROUND – TEACHER NEEDS

- The National Commission on Teaching and America’s Future (2007) reports one-third of all beginning teachers leave in their first three years and 50% leave within five years.
- The problem of teacher attrition is even greater for inner city schools (Smith & Smith, 2006).
- Studies looking at teacher turnover reveal that in an urban setting, challenges faced in managing student behavior and social and emotional skill ranks among the top five deterrents to teacher retention (Hinkel, 2009).

BACKGROUND – TEACHER NEEDS – PHILLY TEACHERS

- Data from the 2008 Philadelphia School Health Profile confirms that teachers receive inadequate training in behavior management techniques and social skills development.
- Specifically, only 38% of teachers reported receiving any training in the past two years that addressed the topic of emotional and mental health needs of children.
- This lack of training occurred despite the fact that 84% of teachers requested staff development training that focused on children’s emotional and mental health.

TEACHER NEEDS - CLASSROOM RISK FACTORS

- High student-teacher ratio
- High levels of classroom aggression
- Peer rejection
- Low emphasis on instruction in social and emotional skills
TEACHING AT-RISK KIDS

- 30% of Kindergarten teachers reported at least half of class:
  - Lacked academic skills
  - Difficulty following directions
  - Difficulty working in groups

- 20% of Kindergarten teachers reported at least half of class:
  - Lacked social skills

(Rimm-Kaufman, Pianta & Cox, 2000)

TEACHING AT-RISK KIDS

- Low-SES children are exposed to a wide range of psychosocial stressors, thus are at greater risk for developing emotional and social difficulties

- Schools in low-income communities will likely need to meet the needs of young children with behavioral problems within Kindergarten classrooms

PROBLEM SCOPE

- Social Behavioral Emotional problems
  - Minority Students
  - Non-Minority Students

- School dropout

- Continuous behavioral challenges

- Compromised economic outcomes

- Low academic achievement

- Increased behavioral healthcare through juvenile justice & welfare systems
IDENTIFYING THE GAP

- Inadequate training and support
- Poor classroom management
- Impediments to appropriate self-regulatory and behavioral skills

PRIOR INTERVENTION MODELS

- Clinical & Specialist Staff → Unsustainable, Unnecessary for universal interventions
- Teachers → Mixed Findings on Program Effectiveness

BACKGROUND – TRAINING & SERVICE

- School-based behavioral and mental health prevention programs that provide evidence-based services to low-income, minority children can play a pivotal role in addressing these needs.
- There is a strong need to train pre-service providers (i.e., graduate level students) in school-based behavioral health and socio-emotional prevention efforts that reach out to racial minorities.
- Do we do a good job of this?
BACKGROUND – COLLABORATION

- The report of the Annapolis Coalition on the Behavioral Health Workforce (2007) emphasized:
  - There is a lack of current interdisciplinary collaboration and pre-service professionals appropriately trained to deliver evidence-based care.
  - An inability among professionals to meet the complex behavioral and mental health needs of children and families.

**University - School Partnership Model**

- Addresses training concerns and sustainability challenges.
- Allows both teachers and university students to receive training.
- Allows schools with limited resources to receive effective behavioral and mental health care services at limited to no cost.

**INCREDIBLE YEARS (WEBSTER-STRATTON)**

**MISSION STATEMENT**

<table>
<thead>
<tr>
<th>Belief</th>
<th>The ability to withstand emotional and social challenges rests upon the relationship between parent, teacher, and child.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mission</td>
<td>To advance the social and emotional behavior of children of all ethnic groups through interlocking programs.</td>
</tr>
<tr>
<td>Goal</td>
<td>Develop teaching programs that develop positive parent-teacher-child relationships, recognizing and treating aggressive behavior before a child becomes an adult.</td>
</tr>
</tbody>
</table>
INcredible Years

General Aims/Goals

- Treatment of child aggressive behavior problems and ADHD.
- Prevention of conduct problems, delinquency, violence and drug abuse.
- Promotion of child social competence, emotional regulation, positive attributions, academic readiness and problem solving.
- Improvement of teacher classroom management skills and teacher-parent partnerships.

Incredible Years Dinosaur Curriculum

- Children aged three to eight years
- Two to three times a week
- 20 to 30 minutes during circle time lessons

Lessons use a variety of activities to teach main program themes including:
- Doing your best in school
- Understanding and detecting feelings
- Problem solving
- Anger management
- Being a good friend
SMALL GROUP DINOSAUR CURRICULUM

• Designed to be delivered by specialists
• Students usually screened into the group due to behavioral challenges
• Two-hour weekly small group sessions
• 18 to 22 weeks
• Lessons use a variety of activities to teach main program themes including:
  • communicating feelings
  • having empathy for others
  • solving problems
  • being a good friend
  • effectively managing anger
  • academic skills

OUTCOMES

Classroom Dinosaur findings:
• Child behavior, social competence, and classroom management
• Increased interest and enthusiasm for school
• Enhanced problem-solving and conflict management skills
• Findings hold with diverse populations

Small group findings:
• More positive interactions with peers
• Improved problem-solving and friendship skills
• Reductions in conduct problems findings hold with diverse populations

PROMOTING HEALTHY DEVELOPMENT THROUGH EFFECTIVE PRACTICES (PHDEP)

• Dual interventionists approach (specialist and teacher)
• Integrated content from IY Classroom Dinosaur and Small Group Dinosaur
• Program + lesson plans requested by teachers
• Total of 18 sessions; 1 hour per week
• 3 review weeks (practice, practice, practice)
• Group leader and teacher training
• Teacher participation and Consultant in classroom
PARTICIPANTS

Classrooms: N=6

Student: N=151

PERCENTAGE

<table>
<thead>
<tr>
<th>Number of Classrooms</th>
<th>Male</th>
<th>Female</th>
</tr>
</thead>
<tbody>
<tr>
<td>2</td>
<td>44%</td>
<td>56%</td>
</tr>
<tr>
<td>3</td>
<td>42%</td>
<td>58%</td>
</tr>
<tr>
<td>4</td>
<td>41%</td>
<td>59%</td>
</tr>
<tr>
<td>5</td>
<td>40%</td>
<td>60%</td>
</tr>
<tr>
<td>6</td>
<td>40%</td>
<td>60%</td>
</tr>
</tbody>
</table>

PERCENTAGE

<table>
<thead>
<tr>
<th>Number of Classrooms</th>
<th>Kindergarten</th>
<th>1st grade</th>
<th>2nd grade</th>
</tr>
</thead>
<tbody>
<tr>
<td>28</td>
<td>30%</td>
<td>28%</td>
<td>20%</td>
</tr>
<tr>
<td>41</td>
<td>39%</td>
<td>29%</td>
<td>19%</td>
</tr>
<tr>
<td>31</td>
<td>30%</td>
<td>28%</td>
<td>23%</td>
</tr>
<tr>
<td>28</td>
<td>28%</td>
<td>28%</td>
<td>20%</td>
</tr>
<tr>
<td>25</td>
<td>28%</td>
<td>28%</td>
<td>20%</td>
</tr>
</tbody>
</table>

SCHOOL DEMOGRAPHICS

<table>
<thead>
<tr>
<th>Grades Served</th>
<th>A</th>
<th>B</th>
</tr>
</thead>
<tbody>
<tr>
<td>K-8</td>
<td>K-8</td>
<td>K-8</td>
</tr>
<tr>
<td>Amount of Students</td>
<td>395</td>
<td>318</td>
</tr>
<tr>
<td>Ethnicity:</td>
<td>88% African American</td>
<td>88% African American</td>
</tr>
<tr>
<td>100% economically disadvantaged</td>
<td>100%</td>
<td>100%</td>
</tr>
</tbody>
</table>

*All statistics based on the 2015-2016 school year
From Philadelphia School District website (www.philasd.org)

PROCEDURE

October 2015 - March 2016

18 weeks (once a week)

4 Group leaders + 1 Consultant

Weekly supervision off-site
PROCEDURE

- Structured reward system (Magic Stamp Number)
  - Target behaviors
  - Stamps
  - Reward
  - Increasing number of stamps and/or harder to earn
  - Review weeks
  - Classroom teacher involvement

MEASURES

Timing of Ratings
- Pre-intervention: mid-October
- Post-intervention: April

Abbreviated Social Skills Rating System
- 11 items on 3-point scale
- Higher scores = more adaptive behaviors

Teacher Social Competence Scale
- 12 items on 6-point scale
- Higher scores = more prosocial behaviors and emotion regulation

Behavior Intervention Rating Scale
- Teacher acceptability
- Teacher satisfaction

DATA ANALYSIS PLAN

- Descriptive statistics for the post-intervention change scores on the ASSRS and TSC, as well as for the BIRS
- Paired sample t-tests with pre- and post-intervention total scores from the ASSRS and TSC
### RESULTS

**Table 1: Abbreviated Social Skills Rating System (ASSRS) Change Scores (N = 95)**

<table>
<thead>
<tr>
<th>Item</th>
<th>Min</th>
<th>Max</th>
<th>M</th>
<th>SD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Responds appropriately when hit or pushed by a peer</td>
<td>0</td>
<td>6</td>
<td>3.81</td>
<td>1.58</td>
</tr>
<tr>
<td>Follows your directions</td>
<td>0</td>
<td>6</td>
<td>3.98</td>
<td>1.58</td>
</tr>
<tr>
<td>Ignores peer distractions</td>
<td>0</td>
<td>6</td>
<td>3.69</td>
<td>1.59</td>
</tr>
<tr>
<td>Cooperates with peers</td>
<td>0</td>
<td>6</td>
<td>3.92</td>
<td>1.55</td>
</tr>
<tr>
<td>Gives compliments to peers</td>
<td>0</td>
<td>6</td>
<td>3.91</td>
<td>1.41</td>
</tr>
</tbody>
</table>

*All items were rated on a 6-point scale (0 = much worse; 1 = somewhat worse; 2 = a little worse; 3 = no change; 4 = a little improved; 5 = somewhat improved; 6 = much improved).*

**Table 2: Teacher Rating of Social Competence (TSC) Change Scores (N = 101)**

<table>
<thead>
<tr>
<th>Item</th>
<th>Min</th>
<th>Max</th>
<th>M</th>
<th>SD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Show empathy and compassion for others' feelings</td>
<td>0</td>
<td>6</td>
<td>4.37</td>
<td>1.36</td>
</tr>
<tr>
<td>Handle help share materials and act cooperatively with others</td>
<td>1</td>
<td>6</td>
<td>4.41</td>
<td>1.30</td>
</tr>
<tr>
<td>Take turns, play fair, and follow the rules</td>
<td>0</td>
<td>6</td>
<td>4.59</td>
<td>1.36</td>
</tr>
<tr>
<td>Handle conflicts with others</td>
<td>0</td>
<td>6</td>
<td>4.45</td>
<td>1.36</td>
</tr>
</tbody>
</table>

*All items were rated on a 6-point scale (0 = much worse; 1 = somewhat worse; 2 = a little worse; 3 = no change; 4 = a little improved; 5 = somewhat improved; 6 = much improved).*
RESULTS

Table 2: Teacher Rating of Social Competence (TSC) Change Scores (N = 101)

<table>
<thead>
<tr>
<th>Item</th>
<th>Min</th>
<th>Max</th>
<th>M</th>
<th>SD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Recognize and label his/her feelings and those of others appropriately</td>
<td>0</td>
<td>6</td>
<td>4.29</td>
<td>1.37</td>
</tr>
<tr>
<td>Handle disagreements in a positive manner</td>
<td>0</td>
<td>6</td>
<td>4.30</td>
<td>1.40</td>
</tr>
<tr>
<td>Get angry when provoked by other children</td>
<td>0</td>
<td>6</td>
<td>4.18</td>
<td>1.48</td>
</tr>
<tr>
<td>Get upset when having few models with some tasks (e.g., reading, math)</td>
<td>1</td>
<td>6</td>
<td>4.22</td>
<td>1.37</td>
</tr>
<tr>
<td>Not verbal or physical aggression to other persons</td>
<td>0</td>
<td>6</td>
<td>4.1</td>
<td>1.52</td>
</tr>
<tr>
<td>Not classroom rule and teachers’ direction</td>
<td>0</td>
<td>6</td>
<td>4.15</td>
<td>1.30</td>
</tr>
</tbody>
</table>

All items were rated on a 6-point scale (0 = much worse; 1 = somewhat worse; 2 = a little worse; 3 = no change; 4 = a little improved; 5 = somewhat improved; 6 = much improved).

RESULTS

Results suggest that students’ prosocial behaviors and social competence skills improved over time, as demonstrated by teachers’ responses on the ASSRS and TSC rating scales.

Significant difference between the baseline (M = 13.07, SD = 6.37) and post-intervention scores (M = 15.38, SD = 4.31) on the ASSRS; t(83) = -3.38, p = 0.001.

Significant difference on the TSC rating scale between baseline (M = 31.65, SD = 14.65) and post-intervention scores (M = 38.72, SD = 14.16); t(73) = -3.14, p = 0.002.

Table 3: Behavior Intervention Rating Scale (BIRS) Scores (N = 6)

<table>
<thead>
<tr>
<th>Item</th>
<th>Min</th>
<th>Max</th>
<th>M</th>
<th>SD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Was an acceptable intervention for behavior problems in the classroom setting</td>
<td>2</td>
<td>6</td>
<td>5</td>
<td>1</td>
</tr>
<tr>
<td>Was an acceptable intervention for social skills/competence problems in the classroom setting</td>
<td>2</td>
<td>6</td>
<td>5.33</td>
<td>0.82</td>
</tr>
<tr>
<td>Was effective in reducing behavior problems in the classroom setting</td>
<td>3</td>
<td>6</td>
<td>5</td>
<td>1.44</td>
</tr>
<tr>
<td>Was effective in promoting social skills/competence in the classroom setting</td>
<td>3</td>
<td>6</td>
<td>5.33</td>
<td>1.44</td>
</tr>
<tr>
<td>Was appropriate for a variety of children</td>
<td>3</td>
<td>6</td>
<td>5</td>
<td>1.98</td>
</tr>
<tr>
<td>Quickly improved student behavior</td>
<td>3</td>
<td>6</td>
<td>6.17</td>
<td>1.71</td>
</tr>
<tr>
<td>Quickly improved student social skills/competence</td>
<td>3</td>
<td>6</td>
<td>6.88</td>
<td>1.59</td>
</tr>
<tr>
<td>Improved behavior in students’ behavior</td>
<td>3</td>
<td>6</td>
<td>6.55</td>
<td>1.33</td>
</tr>
</tbody>
</table>

All items were rated on a 7-point scale (1 = strongly disagree; 2 = disagree; 3 = slightly disagree; 4 = slightly agree; 5 = agree; 6 = strongly agree; 7 = completely agree).
RESULTS

Table 3: Behavior Intervention Rating Scale (BIRS) Scores (N = 6)

<table>
<thead>
<tr>
<th>Item</th>
<th>Min</th>
<th>Max</th>
<th>M</th>
<th>SD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Improved behavior to the point that students who had behavior problems now do not noticeably deviate from their other classmates' behavior</td>
<td>1</td>
<td>6</td>
<td>4</td>
<td>1.79</td>
</tr>
<tr>
<td>Not only improved students' behavior in my classroom but also in other settings (e.g., other teachers' settings)</td>
<td>1</td>
<td>5</td>
<td>3.5</td>
<td>1.52</td>
</tr>
<tr>
<td>Improved enough students' behavior such that it is no longer a problem in my classroom</td>
<td>1</td>
<td>6</td>
<td>4</td>
<td>1.79</td>
</tr>
<tr>
<td>Would suggest the use of Dino School to other teachers</td>
<td>1</td>
<td>6</td>
<td>5.5</td>
<td>0.55</td>
</tr>
<tr>
<td>Most teachers would find Dino School suitable for behavior problems in the classroom setting</td>
<td>1</td>
<td>6</td>
<td>5.5</td>
<td>0.55</td>
</tr>
<tr>
<td>Most teachers would find Dino School suitable for behavior problems in the classroom setting</td>
<td>1</td>
<td>6</td>
<td>5.5</td>
<td>0.55</td>
</tr>
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<td>6</td>
<td>5.5</td>
<td>0.55</td>
</tr>
<tr>
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<td>1</td>
<td>6</td>
<td>5.5</td>
<td>0.55</td>
</tr>
<tr>
<td>I would be willing to use Dino School in the classroom setting in the future</td>
<td>1</td>
<td>6</td>
<td>5.5</td>
<td>0.55</td>
</tr>
<tr>
<td>Overall, Dino School was beneficial for my students</td>
<td>1</td>
<td>6</td>
<td>4.5</td>
<td>1.23</td>
</tr>
</tbody>
</table>

All items were rated on a 6-point scale (1 = strongly disagree; 2 = disagree; 3 = slightly disagree; 4 = slightly agree; 5 = agree; 6 = strongly agree).

RESULTS

Table 4: Highest Behavior Intervention Rating Scale (BIRS) Scores (N = 6)

<table>
<thead>
<tr>
<th>Item</th>
<th>Min</th>
<th>Max</th>
<th>M</th>
<th>SD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Was appropriate for a variety of children</td>
<td>5</td>
<td>6</td>
<td>5.33</td>
<td>0.52</td>
</tr>
<tr>
<td>Would suggest the use of Dino School to other teachers</td>
<td>5</td>
<td>6</td>
<td>5.5</td>
<td>0.55</td>
</tr>
<tr>
<td>Most teachers would find Dino School suitable for behavior problems in the classroom setting</td>
<td>5</td>
<td>6</td>
<td>5.5</td>
<td>0.55</td>
</tr>
<tr>
<td>Would be willing to use Dino School in the classroom setting in the future</td>
<td>5</td>
<td>6</td>
<td>5.5</td>
<td>0.55</td>
</tr>
<tr>
<td>Like the procedures and strategies used in Dino School</td>
<td>5</td>
<td>6</td>
<td>5.5</td>
<td>0.55</td>
</tr>
</tbody>
</table>

All items were rated on a 6-point scale (1 = strongly disagree; 2 = disagree; 3 = slightly disagree; 4 = slightly agree; 5 = agree; 6 = strongly agree).

RESULTS SUMMARY

• ASSRS scores significantly increased from baseline to post-intervention, with means tending toward "a little improved."

• TSC scores significant increased from baseline to post-intervention, with mean scores ranging from "a little improved" to "somewhat improved."

• BIRS Scores show teachers perceive the PHDEP program to be acceptable, feasible, and effective.
DISCUSSION

- Early intervention—reduction in long-term problems
- Behavioral & social problems emerge in early years
- Low SES—higher risk

PHDP

- Improvements in:
  - Emotional skills
  - Behavioral skills
  - Social skills

- Teacher acceptability & satisfaction

LIMITATIONS

- Positive bias from classroom teachers
- Use of abbreviated measures
- Lack of control group
- Lack of academic performance outcomes

IMPLICATIONS AND FUTURE DIRECTIONS

- Dual Interventionist approach
- Collaboration and support for classroom teachers
- Dual Interventionist on program outcomes
- Better understanding of barriers against partnership
- More policy support (ESSA?)
QUESTIONS / DISCUSSION

This study was funded by a grant from the Pew Charitable Trust to B. Daly

OBJECTIVES

1. List advantages of using a universal classroom-based approach to promote student engagement and reduce barriers to treatment.

2. Participants will understand the benefit of using a dual-interventionist approach to implementing prevention programs.