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Conduct Problems Prevention Research Group (1999). Initial impact of the Fast Track prevention trial for conduct problems: II. Classroom Effects. *Journal of Consulting and Clinical Psychology, 67*(5), 648-657.

For many years mental health professionals have promoted prevention as the missing link in a continuum of services for children and their families. This series of articles reports on some ongoing work in the area of prevention targeting very young children. The Fast Track intervention is a highly coordinated program designed to improve the social, emotional, and cognitive skills of children who are at high risk for long-term behavioral problems. The program is based upon a model of antisocial development that suggests behavioral problems are multiply determined and that factors contributing to aggressive behavior have a cumulative effect on a child's social and academic development. Accordingly, the program is designed to address the social and emotional environment of high-risk children through a multi-level intervention (conducted at the "universal" level and at various "specialized" levels). Research results suggest that the Fast Track intervention improved the social, emotional, and reading skills of these high-risk children.

The first article provides an overall, but detailed, summary of the Fast Track intervention and research results. The accompanying article concentrates on one interesting and crucial component of the Fast Track intervention, the Promoting Alternative THinking Strategies (PATHS) curriculum. The PATHS curriculum was delivered at the universal (in-class) level, and was designed to promote the emotion-regulation and prosocial skills of all (i.e., high-risk and non-high-risk) children in the regular education classroom. The authors note that the article on the PATHS curriculum presents "the first reported study of a universal social competence intervention implemented at the elementary grade that used the classroom, rather than the student, as the unit of analysis" (p. 655).

The Fast Track intervention study included 891 first grade children (nested within 401 classrooms) who were at high-risk of developing long-term behavioral and academic problems. The children attended school in four districts having high crime and poverty rates (Durham NC, Nashville TN, Seattle WA, and central Pennsylvania). All children were in regular education classes at the beginning of the first grade year, and were selected through teacher and parent reports of their disruptive behavior in kindergarten and at home. Of the 891 high-risk children identified, 445 received the intervention program at both levels. The remaining 446 children attended schools that had been randomized into a control group category, and did not receive either level of intervention.

The Fast Track intervention model was designed to help the target group of high-risk children (N=445) to develop non-aggressive peer relationships in school, to reduce the stress level of the overall classroom environment, and to educate their parents about appropriate disciplinary measures and positive parenting skills. In order to achieve these multiple goals, the Fast Track intervention "operated" at two levels: 1) in the classroom where both the target children and their non-high risk peers received the PATHS curriculum to build emotional and prosocial skills, and 2) at the specialized level designed solely for the target group of high-risk children. The specialized level included after school "enrichment sessions" for the children and their parents,

Prepared by the Research and Training Center for Children's Mental Health, Louis de la Parte Florida Mental Health Institute, University of South Florida, 13301 Bruce B. Downs Blvd. Tampa, FL 33612, (813) 974-4661 For more information, contact Kutash@hal.fmhi.usf.edu. Website: <u>http://rtckids.fmhi.usf.edu</u> semi-weekly tutoring sessions during school hours, and home visitations made by enrichment session coordinators (please see the insert for a breakdown of enrichment session activities).

Breakdown of Time Spent in Two-Hour Enrichment Sessions

First Hour:

Children: Met in "friendship groups" (social skills training groups) of 5-6 children. Facilitated sessions focused on reviewing and practicing skills in emotional understanding and communication, friendship building, self-control, and social problem solving. *Parents:* Met in facilitated groups to discuss parenting strategies that would support child-school adjustment and improve child behavior. Primary content areas included: positive family-school relationships, parental self-control, appropriate expectations for child's behavior, improved parent-child interaction to decrease disruptive behavior.

Second Hour:

Parent-child pairs (thirty minutes): Participated in positive cooperative activities and practiced positive parenting skills with staff support. Activities included: games, crafts, and joint reading activities.

Academic tutoring (thirty minutes): In this last thirty minute session, children received academic skills tutoring (designed to promote reading skills) while their parents observed. The after school enrichment sessions were coordinated with the PATHS curriculum in order to ensure that high-risk children and their parents were exposed to the curriculum contents before they were introduced in class. In this way, the children received a "head start" toward the skills they would learn in class with their peers. The program was presented to parents with a positive, skills-enhancing focus, and parents were paid for each session they attended. Childcare and transportation were also provided. Over 99% of parents attended at least one session, and 72% attended over half of the sessions.

In addition to the enrichment sessions, high-risk children received additional tutoring for reading and social skills development during school hours. The same paraprofessionals from the enrichment sessions tutored the children during school hours, thus ensuring that the children had contact with a supportive adult on a regular basis throughout the year. The enrichment session paraprofessionals also conducted bi-weekly visits to the children's homes. The visits were designed to develop trusting relationships with the parents and children and to promote general problemsolving skills for the entire family (e.g., marital conflict, housing issues). Most of the participants received at least six home visits.

At the end of the school year, an extensive variety of measures were

used to assess the intervention. Results of the measures were compared between the high-risk children who received the intervention, and the control group of high-risk children who did not receive the intervention. Findings revealed that the intervention-group children improved in emotional and social coping skills, and made "distinct" progress with basic reading skills. The authors conclude, "these improvements in skills were accompanied by more positive peer relations at school, as well as better language arts grades" (p. 643). Parents of the high-risk children demonstrated more positive involvement with their children and more appropriate disciplinary practices. Parents also reported a greater sense of satisfaction with their parenting and self-efficacy. The Fast Track preventive intervention is designed to continue through grade 10. The trials reported in these articles for grade one are encouraging. The Conduct Problems Prevention Research Group has illustrated that a successful, large scale, and comprehensive school-based intervention is indeed possible.

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