

EBP Fact Sheets

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Aggression Replacement Training

Website: uscart.org/new

Aggression Replacement Training® (ART) is a cognitive behavioral intervention program to help children and adolescents improve their social skill competence and moral reasoning, better manage anger, and reduce aggressive behavior. ART has been implemented in schools and juvenile delinquency programs across the United States and throughout the world.

Target Audience

The program was developed for chronically aggressive and violent adolescents ages 12–17 who were incarcerated in juvenile institutions. ART has since been adapted for children in schools and mental health settings and for adults. It can be taught to children and adolescents from all socioeconomic backgrounds in rural, urban, or suburban communities. ART has also been used in juvenile delinquency programs and in mental health settings to reduce aggressive and antisocial behavior and to promote anger management and social competence.

Program Components

The program consists of 10 weeks (30 sessions) of intervention training and is divided into three components—social skills, anger control, and moral reasoning. Research has shown that students who develop skills in these areas are far less likely to engage in a wide range of aggressive and high-risk behaviors. Clients attend a one-hour session in each component each week. Incremental learning, reinforcement techniques, and guided group discussions enhance skill acquisition and reinforce the lessons in the curriculum, which are intended to address the behavioral, affective, and cognitive components of aggressive and violent behavior.

Training and Technical Assistance

Educators interested in ART can receive training and program support from G & G Consultants, LLC, which provides technical assistance to criminal justice and human services agencies (including schools and government jurisdictions for youth at risk). G & G Consultants, LLC, provides training for the ART at three levels: The basic level prepares staff to implement ART at their facility or agency, the advanced level teaches participants the skills and knowledge to train others in ART, and the master's level is adapted to match program staff's individualized needs.

Evaluation Results

Outcomes of studies include:

- Up to **16%** reduction in recidivism
- Improved relationships with teachers
- **20%** decrease in daily rate of antisocial behavioral incidents
- **17%** decrease in daily number of antisocial behavioral incidents
- Increase in knowledge of social skills
- Increase in positive behaviors

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Check In Check Out

Check In Check Out (CICO), sometimes referred to as the Behavior Education Program, is a social and emotional education program that helps children and youth set behavioral goals, with daily feedback and support for meeting those goals. The goal of CICO is to prevent students who are acting out from escalation and provide them with more frequent feedback on their behavior to prevent future problem behavior.

Target Audience

CICO is intended for students at the elementary, middle, or high school level who have been identified as at risk for problem behaviors. The program works best for students who find adult attention reinforcing.

Program Components

CICO provides at-risk students with additional teaching of appropriate behavior through clearly defined expectations and goals, daily prompts from a designated positive adult, daily prompts at each class or activity, daily feedback from teachers and parents, and additional supports available on a regular basis.

Students recommended for CICO check in with a positive adult at school every morning to receive their behavioral checklist for the day, which lists the behavioral goals they are working toward, and to receive feedback and support for meeting those goals. After each class, teachers assign points related to the degree that students met their behavioral objectives and then provide feedback. At the end of each day, students check out with the same positive adult to receive feedback and tally their points for the day. Accumulated points can be traded in for predetermined rewards (activities, prizes, free time, or other special things at the school). Students take the checklist home to their parents to review and sign. Parents are instructed to give praise and not to punish. The signed checklist is returned the next morning to be entered into a schoolwide information system so that all points can be tracked and data can be used to make student support decisions.

Costs

Two main resources exist for CICO:

- The book *Responding to Problem Behavior in Schools: The Behavior Education Program* by Deanne A. Crone, Robert H. Horner, and Leanne S. Hawken (2003, \$41) describes the program in detail.
- A training DVD, *The Behavior Education Program: A Check-In, Check-Out Intervention for Students at Risk* created by Leanne S. Hawken, Hollie Pettersson, Julie Mootz, and Carol Anderson (2006, \$55), offers detailed information on how to implement CICO; it also includes downloadable forms and training materials.

Evaluation Results

Outcomes of studies include the following:

- Up to a **51%** reduction in office disciplinary referrals by participating students
- **33%** increase in pro-social behaviors
- **57%** decrease in internalizing behaviors
- **28%** increase in social skills

Functional Family Therapy

Website: fftinc.com

Functional Family Therapy (FFT) is an empirically grounded, well-documented, and highly successful family intervention that focuses on children and teens who are at risk or are already involved with juvenile justice. Through clinical sessions with a trained therapist, FFT works to develop family members' inner strengths and their belief that they can improve their situations. These characteristics provide the family with a platform for change and future functioning that extends beyond the direct support of the therapist and other social systems. In the long run, the FFT philosophy leads to greater self-sufficiency, fewer total treatment needs, and considerably lower costs.

Target Audience

The program is designed both for youth ages 10–18 whose problems range from acting out to conduct disorder to alcohol and other substance abuse, and for their families. Participating families tend to have limited resources, a history of failure, a range of diagnoses, and exposure to multiple systems. FFT can be provided in a variety of contexts, including schools, child welfare, probation, parole, and mental health, and as an alternative to incarceration or out-of-home placement.

Program Components

FFT is a short-term intervention—on average, participants require 8 to 12 sessions for mild cases and up to 30 hours of direct service (e.g., clinical sessions, telephone calls, and meetings involving community resources) for more difficult cases. Sessions are generally spread over a three-month period. FFT is a multi-systemic prevention program that focuses on the multiple domains and systems within which the participants live. The FFT intervention is also multi-systemic and multi-level as it includes the treatment system, family and individual functioning, and the therapist as major components. FFT has three specific intervention phases: engagement and motivation, behavior change, and generalization. Each phase has distinct goals and assessment objectives, addresses different risk and protective factors, and calls for particular skills from the interventionist or therapist providing treatment.

Training and Technical Assistance

The training and implementation model is based on clinical training for all staff, advanced clinical training of team leaders, follow-up visits, and ongoing supervision. It is a three-phase process, with each phase lasting approximately one year. Training is suitable for a wide range of interventionists, including paraprofessionals under supervision, trained probation officers, mental health technicians, and degreed mental health professionals (e.g., M.S.W., Ph.D., M.D., R.N., M.F.T.).

The training components involve:

- Two two-day clinical trainings (one on-site and one off-site) for all FFT therapists in a working group
- An externship training for one working group member, who will become the clinical lead for the working group

- Three follow-up visits per year (two days each, on-site)
 - Supervision consultations (four hours of monthly phone consultation)
 - Supervision training for the site supervisor
-

Costs

Implementation costs for FFT in one working group are approximately \$29,500, which covers phase one and start-up costs (but not travel). The project cost, including training and implementation, is approximately \$2,000 per family. Phase two training fees are \$12,000, and Phase 3 training fees are \$5,000 (not including travel).

Evaluation Results

Both randomized trials and non-randomized comparison group studies show that FFT significantly reduces recidivism for a wide range of juvenile offense patterns. Studies show that when compared with no treatment, other family therapy interventions, and traditional juvenile court services (e.g., probation), FFT can reduce adolescent re-arrests by at least **20%** and as much as **60%**. Studies have also found that FFT dramatically reduces the cost of treatment. A recent Washington State study, for example, shows savings of up to **\$14,000** per family.

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Incredible Years

Website: incredibleyears.com

Incredible Years (IY) is a comprehensive set of curricula designed to promote social competence and prevent, reduce, and treat aggression and related conduct problems in children ages 4–8. The interventions that make up this series—parent, teacher, and child training—are guided by developmental theory concerning the role of multiple interacting risk and protective factors (child, family, and school) in the development of conduct problems. IY’s overall goal is to prevent children from developing delinquency, drug abuse, and violence problems as they enter adolescence.

Target Audience

The curricula are written for parents, teachers, and children ages 2–12. Designed to serve both broad and selected populations, the IY series has been tested in several diverse communities, specifically in those with significant African American and Hispanic populations. The results show that this program is very effective across diverse groups when appropriate adaptations are made.

Program Components

IY has three separate components:

- **The Parent Training Series** strengthens parent competencies, including monitoring, positive discipline, and confidence, while fostering parent involvement in children’s school and preschool experiences.
- **The Teacher Training Series** is a classroom management training program for teachers, teacher aides, school psychologists, and other school personnel working with students. In addition to teaching behavior management skills, the program helps teachers promote pro-social behavior in the classroom, improve school readiness, and reduce classroom aggression. It also teaches skills for working collaboratively with parents to increase their school involvement.
- **The Dinosaur Child Training Program** has two versions: **(1) *The Small Group Treatment Program***, a universal prevention program for an entire classroom, is implemented by counselors or therapists with small groups of children and ideally offered with the Parent Training Program. **(2) *Classroom-based Prevention*** is a selected prevention program for young children exhibiting aggression and conduct problems. This classroom curriculum improves peer relationships and reduces aggression at home and at school.

Training and Technical Assistance

An “authorized workshop,” offered one to three times a year in Seattle by a certified trainer, is highly recommended. Prospective leaders and mentors should have training in child development, behavior management, and group process. There is a four-level, hierarchical certification process. The first level

begins with completion of Group Leader Training, which enables one to run an IY program. After demonstrated success with their first two groups, group leaders may progress to Certified Group Leader, Certified Group Mentor, and finally Certified IY Trainer. Only the initial Group Leader Training is required for certification as a group leader for any IY program, but leaders are encouraged to participate in a series of workshops and mentoring sessions while continuing to lead the program. Separate training and certification processes are required for each branch of the IY program (parent, teacher, and child training). Certified trainers are available for ongoing consulting. New group leaders may submit videotapes for review and feedback from the IY certified trainers as part of their certification process.

Costs

Registration fees for the Seattle training are as follows:

- Parent Program (three days)—\$400
- Child Small Group Dina Treatment Program (two days)—\$300
- Teacher Effective Classroom Management Training (two days)—\$300
- Effective Classroom Management and Dina School Training (three days)—\$400

Trainers can travel to an agency for on-site training. The cost is \$1,500 per day for the actual training plus travel, meals, and accommodations for the trainer (some sites will pay an additional fee for travel time). In addition to these training fees, there is a \$350 fee to become a certified group leader. Ongoing consultation with a certified trainer costs \$150 per hour-long telephone call, and \$175 for a consultation day at the IY headquarters in Seattle.

Evaluation Results

Parent Training Series

Six randomized control group evaluations of the parenting series were conducted by the program developer and colleagues at the University of Washington, as well as five independent replications by other investigators. *All evaluations reported significant findings:*

- Increases in positive parental affect, such as praise, and reduced use of criticism and negative commands
- Increases in parent use of effective limit-setting, evidenced by the replacement of spanking and harsh discipline with nonviolent discipline techniques and increased monitoring of children
- Reductions in parental depression
- Increases in parental self-confidence
- Increases in positive family communication and problem-solving
- Reductions in conduct problems in children's interactions with parents and increases in their positive affect and compliance to parental commands

Teacher Training Series

Two randomized control group evaluations of the teacher training series by the program developer and colleagues at the University of Washington reported significant findings:

- Increases in teachers' use of praise and encouragement and reduced use of criticism and harsh discipline
- Increases in children's positive affect and cooperation with teachers, positive interactions with peers, school readiness, and engagement with school activities

- Reductions in peer aggression in the classroom

Child Training Series

Two randomized control group evaluations of the child training series reported significant findings:

- Increases in children's appropriate cognitive problem-solving strategies and more pro-social conflict management strategies with peers
- Reductions in conduct problems at home and at school

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Multisystemic Therapy

Website: mstservices.com

Multisystemic Therapy (MST) is an intensive family- and community-based treatment that targets high-risk juvenile offenders and their families. Its methods help change the way these adolescents function in their own home, school, and neighborhood environments by promoting positive social behavior and decreasing antisocial behavior. The multisystemic approach views individuals as part of a complex network of interconnected systems that encompass individual, family, and extra-familial (peer, school, neighborhood) factors. Intervention may be necessary in any one or a combination of these systems. MST strives to empower parents and caregivers to address the difficulties that arise in raising teenagers and to empower youth to cope with family, peer, school, and neighborhood problems.

Target Audience

MST is designed for chronic, violent, or substance-abusing juvenile offenders between ages 12 and 17 at high risk for out-of-home placement and their families. MST has been shown to be equally effective for males and females and for African American and white youth and families. There is also evidence of positive outcomes with Latino families.

Program Components

To reduce barriers that keep families from accessing services, MST therapists come to the home. They have small caseloads of four to six families, work as a team (therapists and supervisor), are available around the clock, and provide services at times convenient to the family. On average, treatment involves about 60 hours of contact during a four-month period, with exact frequency and duration determined by family need. Therapists empower parents to take the lead in setting treatment goals. They help parents improve their effectiveness by identifying strengths, developing natural support systems (e.g., extended family, neighbors, friends, church members), and addressing barriers (e.g., parental substance abuse, high stress, poor relationship with partners). Parents and therapists collaborate on best strategies for important day-to-day issues, such as setting and enforcing curfews and rules, decreasing the adolescent's involvement with deviant peers, promoting friendships with pro-social peers, improving the adolescent's academic and/or vocational performance, and coping with any criminal subculture that may exist in the neighborhood.

Training and Technical Assistance

The core MST program development services are pre-training organizational assessment and assistance, an initial five-day training for all clinical staff, weekly MST clinical consultation for each treatment team, ongoing quality control (through the monitoring of treatment fidelity/adherence), and quarterly 1.5-day booster trainings, in areas identified by therapists, to facilitate in-depth examination and

problem-solving of particularly difficult cases. The MST package of services also includes a pre-training site assessment, assistance with program specification and design, and ongoing technical assistance regarding barriers to achieving successful clinical outcomes. Clinicians must audiotape sessions with clients for review by MST supervisors, and supervisors must audiotape group supervision for review by MST consultants.

Before implementing MST, it is recommended that the following resources and staff are in place:

- Dedicated full-time clinical staff of three to five people, including a supervisor, who work as a clinical “team” and who are knowledgeable and experienced (e.g., have master’s degrees in counseling or social work)
- Staff availability 24 hours a day, 7 days a week
- Small caseloads of four to six families per therapist
- Buy-in from community members and social service agencies to allow MST therapists to take the lead in clinical decision-making and treatment planning for the youth and family

Costs

MST costs approximately \$5,500–7,500 per youth served, with most of this cost being driven by staff salaries.

Evaluation Results

Evaluations of MST have demonstrated the following results for serious juvenile offenders:

- Reductions of **25–70%** in long-term rates of re-arrest
- Reductions of **47–64%** in out-of-home placements
- Extensive improvements in family functioning
- Decreased mental health problems for serious juvenile offenders

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Parenting Wisely

Website: parentingwisely.com

Parenting Wisely is a self-administered, interactive, computer-based program that teaches parents important parenting and conflict management skills. The program is designed to enhance child adjustment and to reduce delinquency and substance abuse. It also seeks to improve problem-solving, parent-school communication, school attendance, and academic performance.

Target Audience

The target audience for Parenting Wisely is low-income, at-risk families who have children ages 9 to 18 with mild to serious behavior problems. Targeted families are those who do not usually seek or complete mental health or parent education treatment for their children's problem behaviors. Parenting Wisely has been evaluated with white, African American, Hispanic/Latino, Asian, and Portuguese families, primarily from lower-income homes. The program was developed for use in rural, urban, and suburban settings. Versions of the program in Spanish and for use with foster parents are available.

Program Components

Parenting Wisely is a stand-alone computer-based program that addresses nine typical problem situations, including doing household chores, improving stepparent-youth relationships, monitoring "troublesome" friends, improving poor school performance, reducing sibling fighting, and complying with parental requests. The nine case studies may be completed in two or three three-hour sessions. Parents also receive a workbook that outlines the problems and solutions included in the program, as well as a glossary of terms, sample behavior charts, and practice exercises. The program may be also implemented in a group format, or used in conjunction with practitioners' work with families.

Costs

The *Parenting Wisely American Teen Program Kit* includes an interactive CD-ROM, 5 parent workbooks, 5 program completion certificates, 20 informational parent brochures, a disc with evaluation forms and a program evaluation guide, and the Teen Group Curriculum for use with parent groups. This kit costs \$659. Agencies may also subscribe to the online interactive version of the program, which costs \$30 for one user for a one-month subscription. Training is not required for Parenting Wisely, as it is a self-administered program. The *Service Provider's Guide* supplies all the information necessary to implement the program. Training is available from the developer (Family Works, Inc.) to help sites add clinical components (e.g., group presentation or family consultation) or to generate community support for the program. Technical assistance is available by phone or e-mail at no charge.

Evaluation Results

The program has been evaluated in juvenile detention, child protective services, health and mental health centers, probation departments, schools, and families' homes. White, African American, Hispanic/Latino, Asian, and Portuguese families, primarily from lower-income homes, were included in these studies. Studies have also been conducted in Australia, and in France and Quebec with a French version of the program. *Outcomes include:*

- Up to a **58%** reduction in child problem behavior
- Improvements in children's prosocial behavior
- A **30%** reduction in maternal depression
- Reduction in parental use of physical punishment and yelling
- Reductions in spousal violence and violence toward children
- A **29%** improvement in general family functioning
- Improved school grades
- Increased knowledge and use of good parenting skills
- Increased parental self-efficacy

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PAX Good Behavior Game

Website: paxis.org/content/goodbehavior.aspx

The PAX Good Behavior Game (PAX GBG) is an elementary school universal intervention implemented by teachers. The PAX GBG combines science from PeaceBuilders, Good Behavior Game, and other studies for a classroom and schoolwide approach that teaches students self-management, self-control, and self-regulation through giving children choices and group rewards for displaying positive, productive actions.

Target Audience

PAX GBG is intended for elementary school students of all populations. It has been found to be effective with economically disadvantaged and highly at risk populations.

Program Components

Teachers introduce the key components of the games to their students. The teacher and students agree on those behaviors they want more of and those they want less of in their classroom. The teacher assigns students to three to five teams to play games, balancing teams so they include different types of children. The PAX games are first very brief, just a minute or two; teachers eventually increase the length of the playing time and the number of games, as teams successfully win the game. Eventually the games are played three times per day during usual classroom activities, for about 15 minutes each.

During gameplay, the teacher observes each team and records any disruptive, distracting, and unwanted behaviors he or she notices; when the game ends, the teacher announces which teams have won. (All teams with three or fewer unwanted behaviors win.) Those on the winning teams earn a randomly selected fun and intrinsically motivating activity. These activities also teach related skills of self-regulation—how to regulate when participating in an exciting activity for those who get to do the activity, and how to regulate when one doesn't win and get a desired goal immediately.

Through gameplay students also practice other skills, such as complimenting others for desired behavior, rather than tattling about undesired behavior. Over time, generalization is observed as students begin to regulate their behavior even when they're not playing the game.

Training and Technical Assistance

PAX Partners, who are trained to gather data on behavior change and to model and support teacher implementation, function as coaches and data collectors of student behavior, and they observe fidelity of implementation. PAX Partners with experience can eventually obtain accreditation from PAXIS, allowing PAX Partners to train additional teachers in their school district at no cost, as long as kits are purchased for each teacher who will implement the program. A two-day on-site PAXIS initial teacher training, and subsequent optional booster training four to six months following the initial training, are recommended.

Costs

The cost for on-site booster training varies by trainer and days of training, depending on factors specific to each training (e.g., trainer, number of days, type and delivery of training). For example, costs for Master Trainers range from \$2,500 to \$6,100 for one day of training, from \$4,800 to \$10,100 for two days of training, and from \$7,100 to \$13,100 for three days of training. Trained staff have access to the PAXIS website, Facebook page, e-resources, and community of practice.

PAX Partner national trainings are also offered. Registration is \$2,500 per person, plus the cost of travel to the training location. (This fee covers the PAX Plus kit, a three-day training, classroom observations in schools implementing PAX GBG, breakfasts and lunches, and continued access to PAXIS resources.)

Each staff person implementing the PAX GBG is required to purchase either the Standard PAX Kit (\$199 per kit, plus shipping/handling) or the PAX PLUS kit (\$249 per kit, plus shipping/handling). PAXIS sells additional optional materials to support site implementation.

Evaluation Results

Research indicates that GBG (1) dramatically reduced disruptive behavior and increased academic engagement time and (2) had effects that have been replicated across elementary school grades. Longitudinal studies found that at-risk children who experienced the GBG in elementary school were less likely to be involved in violent behaviors and less likely to use tobacco or other drugs later in life.

Other outcomes associated with GBG include the following:

- Reduction in disruptive behaviors in the classroom, hallways, and other school settings
- Increased time for teaching and learning in the classroom
- Increase in the number of children being fully engaged in learning
- Reduction in referrals, suspensions, and expulsions
- Reduction in the use of tobacco or other drugs over a child's lifetime
- Reduction in teachers' stress levels

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Peers Making Peace

Website: www.paxunited.org

Peers Making Peace is a peer-mediation program aimed at teaching students prosocial, peaceful conflict resolution skills. The goal is to improve the school environment by reducing violence and discipline referrals and increasing academic performance. The program is based on a combination of strategies that include life and social skills training, conflict prevention and resolution, and peer-led modeling and coaching. Student teams are trained to serve as drug-free role models and “neutral third parties,” acting as mediators in peer conflicts.

Target Audience

The target audience is students in grades K–12 in public or private elementary, middle, and high schools. The program has been replicated in urban, suburban, and rural environments and has been proven effective with all racial and ethnic groups served. It has also worked well in universal, selective, and indicated populations.

Program Components

Peers Making Peace comprises five program components: **(1)** life and social skills training, **(2)** training in conflict prevention and resolution, **(3)** parental involvement in conflict resolution education, **(4)** peer-led modeling and coaching, and **(5)** creation of a supportive school environment. Each school selects a group of 15 to 24 students who represent the community’s racial, ethnic, and gender demographics. Students learn skills such as resolving conflicts, communicating nonverbally, questioning, and maintaining neutrality. The training activities for students vary in length from 10 to 45 minutes. The maximum training time each day varies by age group.

Training and Technical Assistance

A three-day facilitator training provided by the developer, paxUnited, is required. This training prepares teachers, counselors, administrators, and support staff to implement and coordinate Peers Making Peace in their schools. After the training, participants are invited to join the Peace Partners Network, which provides ongoing technical assistance and networking opportunities with other program coordinators.

Costs

There is no cost to train Texas participants, as the training is underwritten by a grant from the Criminal Justice Division of the Texas Governor’s Office. For non-Texas participants (or those attending trainings in locations outside of Texas), the training is \$850 per participant, not including the cost of materials. The cost of the Implementation Kit (including a manual, workbooks, and two videos) is \$275. PaxUnited also provides fee-for-service training and will contract with organizations to provide on-site training.

Evaluation Results

The evaluation of the Peers Making Peace program used a pre-post quasi-experimental design with six experimental and six comparison schools in two school districts. Data from 360 students were collected prior to initiation and after completion of the program. *Key outcomes included the following:*

- In the six schools that implemented Peers Making Peace, there were **1,305** mediations involving more than **2,400** students. Results indicated that **1,275 (97.7%)** mediations resulted in an agreement.
- Discipline referrals decreased by **57.7%** in Peers Making Peace schools, but increased by 8.4% in control schools.
- Assaults decreased by **90.2%** in Peers Making Peace schools, but increased by 33% in control schools.
- Expulsions decreased by **73%** in Peers Making Peace schools, but increased by 6.2% in control schools.

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Positive Action

Website: positiveaction.net

Positive Action is an integrated, comprehensive program designed to improve the academic achievement and multiple behaviors of children and adolescents ages 5 to 18. The program is grounded in the theory that people determine their self-concepts by what they do; in other words, actions determine self-concept, and making positive and healthy behavioral choices results in feelings of self-worth. The program includes school, family, and community components that work together or stand alone. Schools can integrate the program units into a sequenced classroom curriculum or school climate program.

Target Audience

The target audience for Positive Action is youth in grades K–12. The program has been successfully implemented in both school and non-school settings. The program has been delivered to and found effective with diverse ethnic and racial groups as well as court-mandated family groups. The K–4, 7–8, Middle School Drug Program, and Conflict Resolution curricula are also available in Spanish.

Program Components

- **K–12 Instruction Kit:** This age-appropriate curriculum teaches that you feel good about yourself when you engage in positive actions. It's aligned with 49 states' language arts, social studies, science, and math standards.
- **Drug Education Supplement Instructor's Kit:** This curriculum builds on the focus of the regular Positive Action curriculum and approaches drug education from a positive point of view.
- **Conflict Resolution Kit:** This program teaches students the concepts behind resolving conflicts peacefully.
- **Climate Development Kit:** This program includes everyone involved with the school, and it expands the effects of the classroom lessons. The kit includes site-wide tools used to create and maintain a positive culture.
- **Counselor Kit:** Counselors can use this tool with individuals, small groups, classrooms, families, and parenting classes. It includes multi-age lessons and a guide directing counselors in their role of supporting the Positive Action program within the school.
- **Family Kit:** This kit coordinates family activities with the Positive Action curriculum and school climate activities.
- **Community Kit:** Community members are provided with tools to plan and cultivate positive actions in every aspect of the community.

Training and Technical Assistance

The developers offer several training options, including (1) implementation training by Positive Action

trainers, (2) training of trainers (TOT) at the school or district, (3) off-site TOT sponsored by Positive Action, Inc., (4) attendance at another organization's training, and (5) self-training.

Costs

Options 1 and 2 each cost \$1,200 per training day and \$700 per full travel day, plus travel expenses. Option 3 costs \$125 per participant, plus the cost of training materials. Option 4 costs \$125 per participant, plus the cost of training materials, and is based on availability at the sponsoring agency. The cost of Option 5 is based on the cost of materials, which start at \$200.

Evaluation Results

Positive Action has been researched and evaluated in urban, suburban, and rural settings, and in areas with high and low minority representation, mobility rates, and poverty. Findings included improvements in problem behaviors, family functioning, discipline, delinquency, and parental involvement in school activities. *Additional key findings include:*

- Improvement in academic achievement by up to **75%**
- Reduction in absenteeism by up to **45%**
- Improvement in self-concept by up to **43%**
- Reduction in violence and drug, alcohol, and tobacco use by up to **63%**
- Reduction in criminal bookings by up to **94%**
- Reduction in suspensions by up to **80%**

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Positive Behavioral Interventions and Supports

Website: pbis.org

Positive Behavioral Interventions and Supports (PBIS) uses a systems approach to establish the social environment and behavioral supports needed for a school to be an effective learning setting for all students. PBIS is not a prepackaged curriculum; rather, the concept is to assess and design unique support systems that meet the cultural and programmatic needs of each school. The approach is grounded in recent advances in applied behavior analysis, instructional design, mental health, and education reform. *PBIS, which is also called School-Wide Positive Behavior Support, employs three tiers of support:*

- 1. Primary Prevention Practices:** Provides proactive support for students in all locations at all times
- 2. Secondary Prevention Practices:** Targets students at risk for behavioral problems and educational failure
- 3. Tertiary Prevention Practices:** Provides intensive support for students with chronic patterns of problem behavior

Target Audience

PBIS is a schoolwide system (rather than a curriculum or program) that can be used at the elementary, middle, and high school levels. It has traditionally been most successful in elementary and middle schools; however, a 2004 forum that took place in Naperville, Illinois, focused on implementation challenges specific to high school settings. With its focus on systems change and its emphasis on matching the intensity of the intervention to the intensity of the problem behavior, PBIS is applicable to students of all abilities and needs.

System Components

PBIS is a school- or districtwide system of positive behavioral support, which includes the following components:

- An agreed-on and common approach to discipline
- A positive statement of purpose
- A small number of positively stated expectations for all students and staff
- Procedures for teaching these expectations to students
- A continuum of procedures for encouraging displays and maintenance of these expectations
- A continuum of procedures for discouraging rule-violating behavior
- Procedures for monitoring and evaluating the effectiveness of the discipline system on an ongoing basis supporting the Positive Action program within the school.

Training and Technical Assistance

Training is available for school teams (teachers, administrators, and other personnel with direct student contact) and coaches; there is also a [training manual](#) for individuals who have been trained and have participated in implementation. Training typically involves 24–30 hours per year over two to three years. It emphasizes prevention of problem behavior, active instruction on positive behaviors, predictable and consistent consequences for problem behavior, functional behavioral assessment procedures, applied behavior analysis interventions, and ongoing use of data for active decision making. The Office of Special Education Programs (OSEP) Technical Assistance Center works with each state to build a leadership team and model for training so that states may provide their own training for school teams.

Costs

Costs vary depending on the support needed by each state. Since district-based coaches become PBIS trainers, the cost of conducting a training must take into account the coaches' time as a percentage of their regular salary.

Evaluation Results

Results indicate that PBIS can be adopted with fidelity by schools, is associated with decreases in office discipline referrals, and is associated with increases in academic gains (if effective instructional practices are also in place).

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Project ACHIEVE

Website: projectachieve.info

Project ACHIEVE is a comprehensive school reform and improvement program that targets all students' academic and social development. Its most notable components include the Positive Behavioral Support System (PBSS), anchored by the Stop and Think Social Skills Program, Positive Academic Supports and Services (PASS), and the SPRINT/Rtl (School Prevention, Review, and Intervention Team/Response to Intervention) process. The aim for students is to maximize their academic, social, emotional, and behavioral progress, mastery, and proficiency. This includes helping students improve their resilience, protective factors, and effective self-management and self-competency skills so that they are better able to resist unhealthy and maladaptive behaviors, settings, and situations. The aim for staff is to ensure effective instruction and classroom management as well as supports and services for students who are not responding with academic and behavioral success. The aim for schools is to help them to be successful for all students. To achieve these goals, Project ACHIEVE uses a systematic strategic planning and organizational development process to implement prevention programs that focus on the needs of all students, strategic intervention programs for at-risk and underachieving students, and comprehensive, multi-faceted "wrap-around" programs for students with intensive or crisis-oriented needs.

Target Audience

The target audience for Project ACHIEVE is youth ages 3–18. The program has been used in public schools, private and alternative schools, special education centers, psychiatric and juvenile justice facilities, Head Start/preschool programs, and specialized charter schools, and has been implemented in urban, suburban, and rural schools. It has been adapted for implementation in American Indian/Alaska Native schools and communities and for use in state schools with students who have special needs.

Program Components

Project ACHIEVE uses professional development and ongoing technical assistance to target and reinforce critical staff skills and intervention approaches. The program incorporates a continuum of student services, including prevention, strategic intervention, and crisis management, and consists of seven interdependent components implemented over three years:

- Strategic planning and organizational analysis and development
- Data-based problem-solving, Rtl, teaming, and consultation processes (SPRINT/Rtl)

- Effective school, schooling, and professional development
- Academic instruction linked to academic assessment, supports, intervention, and achievement (PASS)
- Age-appropriate social skills instruction linked to behavioral assessment, intervention, self-management, and PBSS
- Parent and community training, support, and outreach
- Data management, evaluation, and accountability

Training and Technical Assistance

Project ACHIEVE is implemented in a series of evidence-based steps that occur over a three-year period, involving the school's (and often district's) entire instructional, administrative, and support staff.

Training typically involves in-service training, classroom-based demonstrations, and technical assistance and follow-up. These are supported by comprehensive and targeted professional development resources that include (a) assessment and intervention kits and tools, (b) electronic and other books and technical assistance documents, and (c) Web- and software-based instruction and evaluation systems and materials.

Costs

The costs of implementing Project ACHIEVE depend on the school or district's existing resources and support systems. On-site professional development, consultation, and technical assistance are provided by Project ACHIEVE, Inc., throughout the year and during the summer. Implementing the program in a school with 500 students and 50 instructional staff would cost an estimated \$55,000 in Year 1, \$42,000 in Year 2, and \$30,000 in Year 3. Other costs associated with the program may include those related to specially designated professional development days, participant stipends, and substitute teachers.

Schools or districts may obtain training to help them implement Project ACHIEVE without the need for ongoing Project ACHIEVE services and consultative support. This "training of facilitators" is typically done by training school or district staff alongside the Project ACHIEVE trainers during the first three years of Project ACHIEVE implementation in a targeted school or schools, and providing additional leadership training in a series of three summer institutes. The first institute involves a five-day training costing \$31,000; the second and third institutes each involve a three-day training costing \$19,500. Prices include materials and the fees for two consultants.

Evaluation Results

Outcomes include:

- A **42%** decrease in office discipline referrals
- Decreases in administrative actions
- Increases in academic performance on literacy and math

EBP FACT SHEET

Reconnecting Youth

Website: reconnectingyouth.com/

Reconnecting Youth: A Peer Group Approach to Building Life Skills (RY) is a school-based prevention program for high school youth at risk for potential school dropout. These youth may exhibit multiple behavioral problems, such as substance abuse, aggression, depression, or suicide-risk behaviors. RY uses a partnership model involving peers, parents, and school personnel to deliver interventions that address the three central program goals:

- Increased school performance
- Decreased drug involvement
- Increased mood management

Students work toward these goals by participating in a comprehensive, sustained, semester-long high school class that integrates small-group work and life-skills training models to effectively enhance youth's personal and social protective factors. RY students learn, practice, and apply self-esteem enhancement strategies, decision-making skills, personal control strategies, and interpersonal communication techniques.

Target Audience

The program targets high school-age youth who are at risk of potential school dropout, in grades 9–12 (ages 14–18) in suburban, urban and rural areas, though it may also be used with middle school youth. RY is effective with multicultural groups from diverse racial/ethnic populations as well as monocultural groups. It is effective with youth at suicide risk as well as those at risk for potential dropout and drug involvement. RY has been adapted by others for use in alternative high schools, juvenile correction programs, group homes, and middle schools.

Program Components

RY has four major components:

- The **RY Class**—a daily (or block-scheduled) semester-long class, taken for credit, and covering five units: Getting Started, Self-Esteem Enhancement, Decision Making, Personal Control, and Interpersonal Communication. Teachers administer the 90-session curriculum to classes of 10–12 students. A separate student workbook includes more than 250 pages of activities, examples, and worksheets.
- The **Social Bonding Component**—strategies for establishing drug-free activities and friendships and for improving a teenager's bond to school. Both school- and community-based activities are used to encourage and support student bonding to healthy, safe behaviors and lifestyles.
- The **Parent Involvement Component**—connects RY students, parents, and the school. Parents are essential for providing support at home for day-to-day life skills learned in RY. Parent support is

encouraged through ongoing contact between the RY teacher or program staff and the parents.

- The **School System Crisis Response Team**—a detailed plan with team responsibilities and timelines for school-based suicide prevention and post-suicide intervention, geared toward identifying and countering high-risk behaviors, such as suicide and suicidal attempts.

Training and Technical Assistance

Program implementation and student outcomes depend heavily on the classroom teacher, coordinator, and administration, who are required to undergo training to administer the curriculum and provide assistance to participating youth. The classroom teacher is aided by a supportive administration and a trained RY coordinator who provides in-class support through observation and regular supervision meetings. The RY classroom teacher must undergo four days of initial training; the RY coordinator takes the same four-day training plus one or two days of additional training in teacher supervision, supportive motivation, and how to coordinate implementation of RY components and monitor implementation fidelity. Additional training and consultation is available if requested. Key personnel, including administrative staff (e.g., principals, assistant principals, district personnel), school support personnel (e.g., attendance, student support), and parents, should also be involved in program implementation. A one-day Administrator Training is available for this group and is recommended prior to implementation. All parties must meet frequently to discuss implementation. Evaluation is recommended to track implementation fidelity and student outcomes and to support sustained funding.

Costs

The four-day training ranges from \$8,000 (for 6–8 participants) to \$14,000 (for 14–16 participants). The cost of the RY curriculum is \$299.95+S/H; the RY student notebook is \$24.95+S/H (reduced rates for bulk orders are available). Additional direct and indirect costs associated with implementing RY include staff (i.e., .2 FTE for each RY teacher/class and .2–1.0 FTE for an RY coordinator), training and evaluation, school bonding activities, classroom supplies, and materials.

Evaluation Results

A quasi-experimental design with repeated measures was used to test the efficacy of the RY indicated preventive intervention. Relative to controls, high-risk youth participating in RY demonstrated the following:

- **18%** improvement in grades in all classes
- **7.5%** increase in credits earned per semester
- **54%** decrease in hard drug use
- **48%** decrease in anger control and aggression problems
- **32%** decline in perceived stress
- **23%** increase in self-efficacy (sense of personal control)

Restorative Justice

Restorative justice is a process for repairing harm that has been done. Unlike more typical responses, which focus on punishing the offender, restorative justice emphasizes restoring a sense of well-being not only to those who were harmed, but also to the individual who committed the harm and to the surrounding community members.

Target Audience

Restorative Justice can be used at the elementary, middle, and high school levels.

Program Components

There are several restorative justice models that can be used in a variety of different situations.

Victim-Offender Mediation. In this model, a trained mediator meets with the victim and the person who caused the harm in a structured setting to discuss the harm done and then come to a potential resolution. This process empowers victims by giving them a voice and allowing them to hear why they were harmed by the individual. Those who caused the harm hear the consequences of their actions and how the victims were affected, which encourages them to develop empathy for the victims. In many cases, the restitution agreement is less important to victims than the opportunity to share their feelings face to face with those who caused the harm. Having direct involvement with the restitution process and plan gives the victim greater satisfaction with the outcome.

Family Group Conferencing. This involves gathering the people in the community most affected by an incident in which an individual caused harm, along with a trained facilitator who guides the group toward reaching a communal agreement for restitution of the harm done. The group typically comprises the victim, the person who caused the harm, and family, friends, and supporters of both the victim and the person who caused the harm. In this process, the victim not only gets to hear from the individual who caused the harm, including his or her reasons for the offense, but also has a voice in holding that person accountable for repairing any harm done. The individual who caused the harm is now far more aware of how his or her behavior impacted not only the victim but also the community; this person sees that he or she has supporters in the community who care about this person, and is held accountable by the entire community, rather than solely by a teacher, principal, or judge. The participants gain skills in conflict resolution and are made aware of their collective responsibility in supporting the offending youth and of any shortfalls that may have previously existed that contributed to the youth's behavior.

Circles. Also referred to as "Peace Making Circles," "Healing Circles," or "Talking Circles," this holistic practice is designed to give everyone in the community who was affected by the harm a voice to help

repair the harm done. It creates a respectful space where participants can share their understanding of the event and work together to take the steps necessary to heal those who were affected and to prevent similar incidences from occurring in the future. In the circle process, both the victim and the person who caused the harm are allowed to voice their feelings, to see firsthand their personal community of support, and to have reinforced the community's values of respect, sharing, honesty, and listening. Similar to conferencing, the person who caused the harm is held accountable by the entire community and is given strategies for behavior change—and unlike punitive measures, the victim has a voice in the restitution agreement. By including and giving a voice to supporters of the person who caused the harm, the victim, and others in the community, the circle process may unearth some underlying causes of the offense. This can help in building a sense of community and of shared responsibility in providing the youth with a comprehensive support system, which may prevent such incidences from happening again.

Training and Technical Assistance

A variety of training courses are available, from introductory sessions on restorative practices, to restorative management and supervision, to specialized trainings on facilitating circles or family group conferences.

International Institute for Restorative Practices (IIRP)

IIRP provides restorative practices training, consulting, resources, and materials throughout the United States and internationally. IIRP and its partners have trained thousands of individuals since the institute's founding in 1995. IIRP offers core trainings covering an introduction to restorative practices, using circles effectively, and facilitating restorative conferences. It also offers specialized trainings on restorative management and supervision, facilitating groups, family group decision-making, facilitating restorative conferences, an introduction to restorative practices, using circles effectively, training of trainers, and reducing bullying with restorative practices. IIRP conducts on-site trainings as well.

Center for Restorative Justice and Peacemaking

The center provides training, technical assistance, and lectures throughout the United States and internationally. Resources, training, and seminar information are available on the center's [website](#).

Costs

Training prices, which constitute the most significant cost in implementing restorative practices in schools, vary, depending on the length, intensity, and location (i.e., on- or off-site) of the course.

Evaluation Results

Outcomes of studies include the following:

- **80%** of victim-offender mediation participants believed that the process and the resulting agreement were fair to both sides
- **95%** of victims who participated in group conferences said that the process and outcome were both fair
- A **40%** reduction in rates of re-arrest
- A **30–50%** reduction in suspensions