

Reviews of Collections of Programs, Curricula, Practices, Policies, and Tools: Evaluated According to Evidence

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For more information, see: <http://nirn.fpg.unc.edu/resources/reviews>

This collection originated as part of the Results for Kids: Resources library of The IDEA Partnership, which transferred early contents to NIRN in 2009.

Social/Emotional and Behavioral Health

Adolescent Substance Use: America's #1 Public Health Problem

National Center on Addiction and Substance Abuse (CASA), Columbia University, New York City. (2011).

This report "reveals the latest information about how substance use and addiction affect the teen brain and neurochemistry; lays out the extent of the problem of teen substance use and addiction; and describes the health, safety and social consequences. It examines the broad factors within American culture that drive adolescent substance use and explores the range of individual factors that compounds these risks for many vulnerable teens. It (a) summarizes what research demonstrates can be done to prevent and reduce the problem; (b) describes the chasm between this knowledge and what health care providers, parents, schools, communities and policymakers are actually doing; and (c) explores the barriers to bridging this gap and implementing effective substance use prevention and control policies. Finally, it provides concrete and evidence-based recommendations for health care professionals, parents, policymakers, educators, the media, researchers and teens themselves to act in the face of the body of knowledge presented in this report." Information on the evidence/practice gap begins on page 139. The recommendations begin on page 149.

[Full text – Adolescent Substance Abuse](#)

Analysis of State Bullying Laws and Policies

Office of Planning, Evaluation and Policy Development, U.S. Department of Education. (2011).

V. Stuart-Cassel, A. Bell, & J. F. Springer.

"In August 2010, the U.S. Department of Education and U.S. Department of Health and Human Services cohosted the first Federal Partners in Bullying Prevention Summit, which brought together government officials, researchers, policymakers, and education practitioners to explore potential strategies to combat bullying in schools. This summit highlighted the need for more comprehensive information about the current status of state legislation, as well as information on how existing laws and policies translate into practice within elementary and secondary school systems. To address this gap, the U.S. Department of Education initiated a study to answer four questions. . . . (a) To what extent do states bullying laws cover U.S. Department of Education-identified key legislative and policy components? (b)

To what extent do states' model bullying policies cover U.S. Department of Education-identified key legislative and policy components? (c) To what extent do school districts' bullying policies cover U.S. Department of Education-identified school district policy subcomponents? and (d) How are state laws translated into practice at the school level? . . . (This report summarizes) current approaches in the 46 states with anti-bullying laws and the 41 states that have created anti-bullying policies as models for schools. . . . Of the 46 anti-bullying laws in place, 36 have provisions that prohibit cyber-bullying, while 13 have provisions that grant schools the authority to address off-campus behavior that creates a hostile school environment. . . . A follow-up study will aim to identify how state laws translate into practice at the school level."

[Press release and click for the full text – Analysis of State Bullying Laws and Policies](#)

[Also see – Bullying in Schools: An Overview \(Juvenile Justice Bulletin\)](#)

Best Practices of Youth Violence Prevention: A Sourcebook for Community Action

Centers for Disease Control and Prevention, Atlanta, Georgia. (2002).

T. N. Thornton, C. A. Craft, L. L. Dahlberg, B. S. Lynch, & K. Baer.

This publication "is the first of its kind to look at the effectiveness of specific violence prevention practices in four key areas: (a) parents and families; (b) home visiting; (c) social and conflict resolution skills; and (d) mentoring. . . . This sourcebook places at your fingertips the best knowledge available about several strategies designed to prevent youth violence. These strategies are among those with the strongest evidence base for reducing youth violence. . . . In addition to gathering information from experts, (the authors) conducted an extensive review of the scientific literature on youth violence prevention to collect the most up-to-date information available in the field. This literature review provides the science base on which recommendations for best practices rest."

[Full text -- Best Practices of Youth Violence Prevention: A Sourcebook for Community Action](#)

Blueprints for Violence Prevention

Center for the Study and Prevention of Violence, University of Colorado at Boulder. (Continuing Collection)

This project has identified "prevention and intervention programs that meet a strict scientific standard of program effectiveness. To date, it has assessed more than 900 programs. . . . Program effectiveness is based upon an initial review by the Center for the Study of Prevention of Violence and a final review and recommendation from a distinguished Advisory Board, comprised of seven experts in the field of violence prevention. . . . Eleven model programs are currently certified by Blueprints, meaning that they have a high level of evidence supporting their effectiveness and should be replicated in other communities to prevent violence and drug abuse. In addition, Blueprints has designated promising programs that have shown good results but require either replication in another community or additional time to demonstrate their effectiveness and sustainability."

[Home page -- Blueprints for Violence Prevention](#)

[Click at the right for model programs, promising programs, selection criteria, and other details]

Breaking Schools' Rules: A Statewide Study of How School Discipline Relates to Students' Success and Juvenile Justice Involvement

Justice Center, Council of State Governments (CSG), New York City. (2011).

“The CSG Justice Center, in partnership with the Public Policy Research Institute at Texas A&M University, has released an unprecedented statewide study of nearly 1 million Texas public secondary school students, followed for at least six years. Among its startling findings are that the majority of students were suspended or expelled between seventh to twelfth grade. Funded by the Atlantic Philanthropies and the Open Society Foundation, this study also found that when students are suspended or expelled, the likelihood that they will repeat a grade, not graduate, and/or become involved in the juvenile justice system increases significantly. African-American students and children with particular educational disabilities who qualify for special education were suspended and expelled at especially high rates.”

[Full text –Breaking School Rules](#)

Challenging Behaviors and the Role of Preschool Education (Policy Brief)

National Institute for Early Education Research (NIEER), Rutgers, State University of New Jersey. (2007)..
L. A. McCabe & E. C. Frede.

“Some research suggests a rise in challenging behaviors among children in early care and education. Among the findings are a high rate of removal from preschool classrooms for behavior problems, a possible link between early non-maternal care and aggressive behaviors in preschool, and concerns from teachers that too many children arrive at school without the social skills required to learn. This begs the question of the role preschool education plays in regard to problem behaviors — whether under certain circumstances it is a contributing factor or whether it can in fact provide positive experiences that lead to a reduction of challenging behaviors. This policy brief reviews the research in order to answer these questions and makes recommendations that can lead to better behavioral outcomes.” Samples of research-based social skills curricula are included. References are cited by number in the text and are shown in the reference list.

[Full text – Challenging Behaviors and the Role of Preschool Education](#)

Crisis Management: Research Summaries

Communique Online. (2011). National Association of School Psychologists, Bethesda, Maryland.
Edited by S. E. Brock.

"In this column, members of the NASP Crisis Management in the Schools Interest Group bring to you summaries of three articles relevant to school crisis response. The first summary reports the findings of a meta-analysis of the factors that contribute to positive outcomes following exposure to a crisis event. The second summary describes an article that discusses issues important to consider when providing group crisis interventions (e.g., psychological debriefing) in cross-cultural contexts. Finally, the third summary reports the findings of a meta-analysis that explored differences in brain size associated with trauma exposure and post-traumatic stress disorder."

[Full text – Crisis Management: Research Summaries](#)

Data Trends: Summaries of Current Research Findings in the Children's Mental Health Field

Research & Training Center for Children's Mental Health, Louis de la Parte Florida Mental Health Institute, University of South Florida, (1999-2010).

"Data Trends are produced to increase the dissemination of current research findings in the area of children's mental health services. There are two Data Trends products: (a) summaries, which detail recent, published articles on systems of care for children with emotional and behavioral disabilities and their families, and; (b) news briefs, which highlight related items or events of interest to the field. A citation is provided for each reviewed publication so the reader will be able to retrieve the original document for further examination."

[To access Data Trends Summaries](#)

Discipline Policies, Successful Schools, and Racial Justice

National Education Policy Center, University of Colorado, Boulder. (2011). D. J. Losen.

"This policy brief reviews what researchers have learned about racial disparities in school discipline, including trends over time and how these disparities further break down along lines of gender and disability status. Further, the brief explores the impact that school suspension has on children and their families, including the possibility that frequent out-of-school suspension may have a harmful and racially disparate impact. As part of the disparate impact analysis, the brief examines whether frequent disciplinary exclusion from school is educationally justifiable and whether other discipline policies and practices might better promote a safe and orderly learning environment while generating significantly less racial disparity. Findings of this brief strongly suggest a need for reform. A review of the evidence suggests that subgroups experiencing disproportionate suspension miss important instructional time and are at greater risk of disengagement and diminished educational opportunities. . . . Overall, the evidence shows the following: (a) there is no research base to support frequent suspension or expulsion in response to non-violent and mundane forms of adolescent misbehavior; (b) large disparities by race,

gender and disability status are evident in the use of these punishments; (c) frequent suspension and expulsion are associated with negative outcomes; and (d) better alternatives are available.”

[Full text – Discipline Policies, Successful Schools, and Racial Justice](#)

Efficacy of Schoolwide Programs to Promote Social and Character Development and Reduce Problem Behavior in Elementary School Children

National Center for Education Research, Institute of Education Sciences, U.S. Department of Education and the Division of Violence Prevention, Centers for Disease Control and Prevention (CDC). (2010).

Prepared by the Social and Character Development Research Consortium.

"The Institute of Education Sciences and the Division of Violence Prevention in CDC's National Center for Injury Prevention and Control collaborated to conduct a rigorous impact evaluation of programs aimed at improving students' behavior. For this evaluation, such programs were termed Social and Character Development (SACD) programs. Seven programs were evaluated, and all were coherent in that their activities were integrated and logically organized based on a theory of action (that differed among the programs), school-based in that they were implemented in the schools by school personnel, and universal in that they were to be implemented for all students in all elementary classrooms in a school. This report provides the results from the evaluation of the seven SACD programs on one cohort of students as they moved from third through fifth grades starting in fall 2004 and ending in spring 2007. The evaluation examined the effects on these students of the seven programs, together and separately, after 1, 2, and 3 school years and also estimated the impact on students' growth in social and character development over the 3 years." The seven programs in the study are (a) Academic and Behavioral Competencies Program; (b) Competence Support Program; (c) Love In a Big World; (d) Positive Action; (e) Promoting Alternative Thinking Strategies; (f) the 4Rs Program (Reading, Writing, Respect, and Resolution); and (g) Second Step.

[Full text & executive summary-- Efficacy of Schoolwide Programs to Promote SACD](#)

Electronic Media and Youth Violence: A CDC Research Brief for Researchers

Centers for Disease Control and Prevention (CDC), U.S. Dept of Health and Human Services (2009).

C. David-Ferdon & M. F. Hertz.

"To inform prevention programs and policies and set the agenda for future research on the topic of electronic aggression, the CDC Division of Adolescent and School Health and Division of Violence Prevention, convened an expert panel on September 20–21, 2006 in Atlanta, Georgia, entitled 'Electronic Media and Youth Violence.' The panel consisted of 13 members who came from academic institutions, federal agencies, a school system, and nonprofit organizations and who were already engaged in work focusing on electronic media and youth violence. Panelists presented quantitative and qualitative data about the incidence and prevalence of this type of violence and the risk and protective factors associated with electronic victimization and perpetration. They also participated in a series of small and large recommendations. . . . Many of the panelists expanded on their presentations and contributed to articles that appeared in a special issue of the *Journal of Adolescent Health*, Volume 41,

Issue 6, which focused on the topic of electronic aggression. (This brief) was developed to summarize the data, to highlight the research gaps, and to suggest future directions in research."

[Full text – Electronic Media and Youth Violence](#)

Evidence-Based Practices for Children Exposed to Violence: A Selection from Federal Databases

U.S. Department of Justice & U.S. Department of Health and Human Services. (2011).

"This package of information summarizes findings and evidence from federal reviews of research studies and program evaluations to help localities address childhood exposure to violence and improve outcomes for children, families, and communities." A detailed chart provides program names, program descriptions, age ranges, outcome indicators, evidence standard (rating), types of outcomes, and other details. A section on service characteristics with evidence-based support for children exposed to violence is also included.

[Full text – Evidence-Based Practices for Children Exposed to Violence](#)

[Also see the Research Digest on Children Exposed to Violence, from the OJJDP Safe Start Center](#)

Evidence-Based Practices for Substance Abuse Disorders

EBP Substance Abuse Database, a project of the University of Washington & the Northwest Frontier Addiction Technology Transfer Center, Salem, Oregon. (Continuing Collection).

"The EBP Substance Abuse Database is a small, but growing, database of evidence-based interventions for treating substance use disorders. Interventions were selected according to criteria. . . . Programs included must either have published research citing them as evidence-based, or be recognized by reputable organizations as evidence-based. In keeping with the educational function of this database, preference is given to programs which have developed a manual or other documentation that can be used by others to replicate the program in their community. This database is intended to serve laypeople and professionals, consumers of substance abuse services, family members, providers of substance abuse services, administrators, and anyone else interested in researching evidence-based practices. . . . Each record in the database includes (a) a description of the intervention and its implementation, (b) populations for which it has been shown to be effective, (c) references to supporting literature, (d) the availability of instructional manuals, and (e) author/developer notes and other useful information." Some practices in this database were developed for adults, others for adolescents.

[Search -- Evidence-Based Practices for Substance Use Disorders](#)

Evidence-Based Program Fact Sheets

National Center for Mental Health Promotion and Youth Violence Prevention, Education Development Center Inc, Waltham, Massachusetts. (Continuing Collection)

This web page provides overviews of a range of evidence-based mental health and violence prevention programs that have proven effective for use with children and youth. Each fact sheet summarizes (a) program description; (b) target audience; (c) special populations/available adaptations; (d) program components; (e) training and technical assistance; (f) program and training costs; (g) evaluation results and components; (h) sources of recognitions of the program; (i) contact information; and (j) selected references.

[Full texts -- Evidence-Based Program Fact Sheets](#)

Evidence-Based Social-Emotional Curricula and Intervention Packages for Children 0-5 Years and Their Families

Technical Assistance Center on Social Emotional Intervention for Young Children,
University of South Florida, Tampa. (2009). D. Powell & G. Dunlap.

"This synthesis examines interventions that (a) are specifically intended to impact social-emotional-behavioral outcomes for children 0-5 years; (b) are manualized; and (c) have been evaluated in at least one study that reported social-emotional-behavioral outcomes for children 5 years or younger, and was published in a peer-reviewed journal. Interventions include curricula and intervention packages meant for use with children and for use with parents/families. . . . Curricula or intervention packages were considered to be manualized if a description of the intervention was available that contained sufficient detail to allow it to be implemented, either by itself, or in conjunction with training. . . . Table 2 provides information concerning the research evidence for each package (including ratings on nine efficacious adoption criteria).

[Full text -- Evidence-Based Social-Emotional Curricula and Intervention Packages](#)

[Scroll down – and see related publications on this page]

How Schools Can Help Students Recover From Traumatic Experiences: A Tool Kit Supporting Long-Term Recovery

Gulf States Policy Institute, RAND Corporation, Santa Monica, California. (2006).
L. H. Jaycox, L. K. Morse, T. Tanielian, & B. D. Stein.

"Many changes in students' performance and behavior stem from their experience of, for example, witnessing violence, undergoing assault or abuse, living through natural disasters, or experiencing acts of terrorism. This tool kit describes how such changes appear in the school setting and provides a compendium of programs available to schools that help support the long-term recovery of traumatized students. (It also) describes how to select students for such programs and possible ways to fund those programs. It compares the programs with one another according to the types of trauma they address, the problems they target, the requirements for training and implementation, and evidence for a program's effectiveness. Finally, it gives a one-page information sheet on each selected program, summarizing the objective, intended population, and format of the program and providing details on

implementation, personnel training and materials, and contact information." Evaluative evidence is summarized in the table in Section 3: Comparing Programs.

[Full text -- Schools Can Help Students Recover From Traumatic Experiences: A Tool Kit Supporting Long-Term Recovery](#)

[Click at the bottom of the page – Download eBook for free.]

Interventions for Disruptive Behavior Disorders: Evidence-Based Practices (EBP) KIT

Substance Abuse and Mental Health Services Administration (SAMHSA),
U.S. Department of Health and Human Services. (2011).

This kit “includes tools to assist in developing mental health programs that help prevent or reduce severe aggressive behavioral, emotional, and development problems in children by enhancing the knowledge of parents, caregivers, and providers.” The kit includes six booklets: (a) How to Use the Evidence-Based Practices KITs; (b) Characteristics and Needs of Children with Disruptive Behavior Disorders and Their Families; (c) Selecting Evidence-Based Practices for Children with Disruptive Behavior Disorders to Address Unmet Needs: Factors to Consider in Decisionmaking; (d) Implementation Considerations; (e) Evidence-Based and Promising Practices; and (f) Medication Management. The booklet on ‘Evidence-Based and Promising Practices’ includes the research base and outcomes for the reviewed practices. The KIT is available in CD-ROM/DVD or in PDF versions.

[Full texts of six booklets -- Evidence-Based Practices KIT](#)

[Click each title at the right]

Matrix of Children’s Evidence-Based Interventions

National Association of State Mental Health Program Directors Research Institute Inc,
Alexandria, Virginia. (2006). J. Yannacci & J. C. Rivard.

This document "summarizes key literature reviews which summarized the effectiveness of prevention, intervention, and/or treatment programs that can be applied to child and adolescent mental health services. The purpose was not to redefine or create another hierarchy of what constitutes an evidence-based practice vs. a promising practice or emerging practice, but rather to compile a comprehensive list of interventions or programs that have been evaluated or more rigorously tested, and found to have varying degrees of evidence as to their effectiveness. After examining the limited number of reviews that exist, 21 publications and journal articles authored by researchers and government agencies, from 1998 to the present (2006), were used to compile the list. These sources are listed with the criteria used by the authors to classify the extent of evidence in existence on a particular program or intervention at the time the review was conducted. . . . This matrix includes -- for each intervention -- a description, the evidence of its effectiveness, availability of technical assistance and training materials, the population and setting with which the program was tested, and sources that identified the program or intervention."

[Full text -- Matrix of Children's Evidence-Based Interventions](#)

[Scroll Down]

Measuring Bullying Victimization, Perpetration, and Bystander Experiences: A Compendium of Assessment Tools

Centers for Disease Control (CDC), U.S. Department of Health and Human Services. (2011).

M. E. Hamburger, K. D. Basile, & A. M. Vivolo.

"Given that numerous measures of bullying experiences exist, researchers and practitioners — particularly those new to the field — may find it challenging to identify which of the available measures is appropriate for assessing a particular bullying experience. This compendium represents a starting point from which researchers can consider a set of psychometrically sound measures for assessing self-reported incidence and prevalence of a variety of bullying experiences. This compendium contains 33 measures, which were selected using specific procedures. Bullying search terms were drawn from a review of the most salient literature. . . These terms were used to conduct searches of multiple electronic databases, which yielded a variety of different measures and scales." Among other criteria, the measure had to be published in a peer-reviewed journal or book, including psychometric information about the measure, when available.

[Full text – Measuring Bullying Victimization](#)

Multiple Responses, Promising Results: Evidence-Based, Nonpunitive Alternatives to Zero Tolerance

Child Trends, Washington DC. (2011).

"While it is clear that protecting the safety of students and staff is one of school leaders' most important responsibilities, it is not clear that zero tolerance policies are succeeding in improving school safety. . . . Child Trends developed this brief to explore these issues. The brief does this in two ways: it reviews existing research on the implementation and effects of zero tolerance in the school setting; and it highlights rigorously evaluated, nonpunitive alternatives to zero tolerance that have shown greater promise in improving school safety and student outcomes. Nonpunitive programs that take a largely preventive approach to school discipline have been found to keep students and schools safe by reducing the need for harsh discipline. These programs take many forms, such as targeted behavioral supports for students who are at-risk for violent behavior, character education programs, social-emotional programs, or positive behavioral interventions and supports that are instituted schoolwide."

[Full text – Multiple Responses, Promising Results](#)

[Click on the title in the first paragraph]

National Registry of Evidence-based Programs and Practices (NREPP): Prevention and Treatment of Mental Health and Substance Use Disorders

Substance Abuse and Mental Health Services Administration (SAMHSA),

U.S. Department of Health and Human Services (Continuing Collection).

"NREPP is a searchable database with up-to-date, reliable information on the scientific basis and practicality of interventions. Users, such as community organizations and State and local officials, can perform custom searches to identify specific interventions based upon desired outcomes, target populations and service settings. . . . Key features of the NREPP system include: (a) custom searches based on desired outcomes, target populations, and service settings; (b) details on each intervention including a brief descriptive summary, the types of outcomes achieved, the costs of implementing the intervention, and complete contact information for the intervention developer; and (c) two independent expert ratings for each intervention — the first assessing the quality of research supporting specific intervention outcomes, and the second assessing the availability of implementation and training materials to support adoption of the intervention in routine service settings."

[Search -- National Registry of Evidence-based Programs and Practices \(NREPP\): Prevention and Treatment of Mental and Substance Use Disorders](#)

[As a first step, it might be useful to click on "View All Interventions"]

[Also see the glossary of definitions that are tailored to the content of the NREPP website](#)

Prevalence and Implementation Fidelity of Research-Based Prevention Programs in Public Schools: Final Report (pertains to findings from Safe and Drug-Free Schools and Communities – State Grants Program)

Prepared by Westat for the Office of Planning, Evaluation and Policy Development.

U.S. Department of Education. (2011).

S. Crosse, B. Williams, C. A. Hagen, M. Harmon, L. Ristow, R. DiGaetano, P. Broene, D. Alexander, M. Tseng, & J. H. Derzon.

“This report presents findings on key program implementation measures for the Safe and Drug-Free Schools and Communities Act: State Grants Program. Funding for the State Grants Program was eliminated in Fiscal Year 2010. Prior to this, grants were awarded to States to support a variety of drug and violence prevention activities for school-age youths. The study examines: (a) the prevalence of research-based drug and violence prevention programs in schools and (b) the extent to which research-based drug and violence prevention programs adhere to the program features on which they are based (the program's implementation fidelity). Findings are based on a review of the research literature and national probability sample surveys of districts, schools and research-based prevention programs. . . . The study identified 19 prevention programs with research-based evidence that suggested an improvement in student behavior. Of all prevention programs that were implemented in the nation's public schools, an estimated 8 percent of them were research-based (e.g., the 19 research-based prevention programs represented 8 percent of all prevention programs implemented in schools). Nearly half of the research-based curriculum programs (44 percent) provided in schools met minimum standards for overall fidelity of implementation; that is, these programs passed on all four program-specific measures of implementation fidelity.”

[Full text – Prevalence and Implementation Fidelity](#)

Programs That Work: Behavior Problems

Promising Practices Network, RAND Corporation, Santa Monica, California (Continuing Collection).

The Promising Practices Network (PPN) website "features summaries of programs and practices that are proven to improve outcomes for children. All of the information on the site has been screened for scientific rigor, relevance, and clarity. . . . Programs are generally assigned either a 'Proven' or a 'Promising' rating, depending on whether they have met the evidence criteria. In some cases a program may receive a Proven rating for one indicator and a Promising rating for a different indicator. In this case the evidence level assigned will be Proven/Promising, and the program summary will specify how the evidence levels were assigned by indicator."

[To access Programs That Work: Behavior Problems](#)

Promoting Social Behavior of Young Children in Group Settings: A Summary of Research

Technical Assistance Center on Social Emotional Intervention, University of Florida, Tampa. (2009).
G. Dunlap & D. Powell.

"This brief synthesis provides a summary of intervention practices that are supported by empirical evidence for promoting social-emotional behavior of young children in group settings (e.g., pre-K classrooms, child care settings). The focus of the synthesis is on toddlers and preschool children who are identified as having disabilities or who are at risk of disabilities, and who have been identified with social-emotional problems. . . . The vast majority of evidence, and the strongest evidence, related to this topic is derived from analyses using single-subject experimental designs. . . . Research-based practices are described in broad categories of intervention strategies. Where the level of procedural specificity and quantity of research permits, the categories are divided into more specific types of interventions. The practices described in the synthesis include those that are explicitly designed to increase the frequency or improve the quality of prosocial interactions, as well as those intended to improve emotional responding and reduce inappropriate and challenging behaviors."

[Full text -- Promoting Social Behavior of Young Children in Group Settings](#)

[Scroll down]

Promotion and Prevention in Mental Health: Strengthening Parenting and Enhancing Child Resilience – Report to the Senate Appropriations Subcommittee on Labor, Health and Human Services

Substance Abuse and Mental Health Services Administration (SAMHSA),
U.S. Department of Health and Human Services. (2007).

"The Senate Appropriations Subcommittee on Labor, Health and Human Services, and Education charged the Center for Mental Health Services within SAMHSA to review the effectiveness of programs

that use a strength-based family approach to promoting mental wellness and preventing mental health problems among at-risk children and youth. The Committee further requested that CMHS identify opportunities and make recommendations related to the expanded use of such programs." This report to the Subcommittee includes information on twelve evidence-based programs: (a) High/Scope Perry Preschool Program; (b) The Incredible Years; (c) Nurse-Family Partnership; (d) Promoting Alternative Thinking Strategies (PATHS); (e) Olweus Bullying Prevention; (f) Family Effectiveness Training; (g) Families and Schools Together (FAST); (h) Second Step; (i) The Strengthening Families Program for Parents and Caregivers and Youth; (j) Brief Strategic Family Therapy; (k) Parenting Wisely; and (l) Reconnecting Youth.

[Full text -- Promotion and Prevention in Mental Health](#)

Reducing Behavior Problems in the Elementary School Classroom: IES Practice Guide

Institute of Education Sciences, U.S. Department of Education. (2008).
M. Epstein (Panel Chair), M. Atkins, D. Cullinan, K. Kutash, & R. Weaver.

"Designed for elementary school educators and school- and district-level administrators, this guide offers prevention, implementation, and schoolwide strategies that can be used to reduce problematic behavior that interferes with the ability of students to attend to and engage fully in instructional activities. . . . The evidence the panel considered in developing this document ranges from experimental evaluations, to single-subject research studies, to expert analyses of behavioral intervention strategies and programs." A checklist for carrying out the recommendations is included.

[Full text -- Reducing Behavior Problems in the Elementary Classroom](#)

[Also see – Doing What Works: Reducing Behavior Problems in Elementary School Classrooms](#)

Report on Physical Punishment in the United States: What Research Tells Us About Its Effects on Children

Center for Effective Discipline, Columbus, Ohio. (2008). Developed in conjunction with Phoenix Children's Hospital, Child Abuse Prevention, Phoenix, Arizona.
E. T. Gershoff.

"This report synthesizes one hundred years of social science research and many hundreds of published studies on physical punishment conducted by professionals in the fields of psychology, medicine, education, social work, and sociology, among other fields. The research supports several conclusions: (a) there is little research evidence that physical punishment improves children's behavior in the long term; (b) there is substantial research evidence that physical punishment makes it more, not less, likely that children will be defiant and aggressive in the future; (c) there is clear research evidence that physical punishment puts children at risk for negative outcomes, including increased mental health problems; and (d) there is consistent evidence that children who are physically punished are at greater risk of serious injury and physical abuse."

[Full text – Report on Physical Punishment in the United States](#)

Research on the Relationship Between Mental Health and Academic Achievement

National Association of School Psychologists, Bethesda, Maryland. (2008). J. L. Charvat.

"This brief summarizes research on 24 aspects of the connections between mental health and academic achievement. The sources include meta-analyses, single studies, and longitudinal studies. . . . A review of more than 200 school-based research studies on the impact of interventions to promote social and emotional skills in children and adolescents between the ages of 5 and 18 revealed an 11% improvement in achievement test scores. . . . Several hundred well-designed studies have documented the positive effects of social and emotional learning programming on students of diverse backgrounds, from preschool through high school, in urban, suburban, and rural settings." A large number of additional findings are also described.

[Full text – Click on Mental Health and Academic Achievement](#)

Resources to Promote Social and Emotional Health and School Readiness in Young Children and Families: A Community Guide

National Center for Children in Poverty, Mailman School of Public Health, Columbia University, New York City. (2005). J. Knitzer & J. Lefkowitz.

This guide “provides information about resources and strategies that families, child care providers, teachers, and others who come into contact with young children every day can use to help infants, toddlers and preschoolers, especially those living in low-income communities, develop the social and emotional skills they need to succeed in school.” Figure 1 (page 7) lists a number of early education programs and curricula with (a) strategy type, (b) presence or absence of control group evaluation, and (c) availability of national training. More detailed descriptions of programs and their evaluation designs and outcomes begin on page 22.

[Overview and click for full text -- Resources to Promote Social and Emotional Health and School Readiness](#)

Safe and Sound: An Education Leader’s Guide to Evidence-Based Social and Emotional Learning Programs

Collaborative for Academic, Social, & Emotional Learning (CASEL), University of Illinois at Chicago. (2003).

Based on a three-year study funded by the Institute of Education Sciences and the Office of Safe and Drug-Free Schools in the U.S. Department of Education, “this guide provides a road map for schools and districts that are launching or adding social, emotional, and academic learning programs. The guide reviews 80 multiyear, sequenced social and emotional learning (SEL) programs designed for use in

general education classrooms. Among these programs are both comprehensive and more narrowly focused programs, such as drug education or anti-violence programs, that can be combined with others. Safe and Sound also offers guidance to educational leaders on how to integrate normally isolated or fragmented efforts with other school activities and academic instruction by providing a framework for 'putting the pieces together.'"

[Full text -- Safe and Sound: An Educational Leader's Guide](#)

School-Based Mental Health: An Empirical Guide for Decision-Makers

Research & Training Center for Children's Mental Health, Louis de la Parte Florida Mental Health Institute, University of South Florida, Tampa. (2006).

"This guide provides practical information and advice for those engaged in developing and implementing effective evidence-based services in the school setting. This resource (a) describes the principal models and approaches identified in the literature from mental health and education, (b) critiques the empirical support for the approaches described, and (c) suggests how science, policy, and practice can be integrated to achieve effective school-based mental health service systems through the adoption of the public health model. . . . The monograph also reviews federal policies and funding strategies that affect the implementation of services. (The authors) close with specific recommendations for increasing accountability and the use of evidence-based practices in the field." Research-based evidence for various models and approaches is discussed throughout the document, and the models are listed by source in Appendices A, B, C, and D.

[Full text -- School-Based Mental Health: An Empirical Guide for Decision-Makers](#)

School Bullying: Extent of Legal Protections for Vulnerable Groups Needs to Be More Fully Assessed – Report to Congressional Requesters

U.S. Government Accountability Office (GAO). (2012).

"GAO was asked to address (a) what is known about the prevalence of school bullying and its effects on victims, (b) approaches selected states and local school districts are taking to combat school bullying, (c) legal options federal and selected state governments have in place when bullying leads to allegations of discrimination, and (d) key federal agencies' coordination efforts to combat school bullying. GAO reviewed research on the prevalence and effects on victims; analyzed state bullying laws, and school district bullying policies; and interviewed officials in 8 states and 6 school districts. States were selected based on various characteristics, including student enrollment, and their definitions of bullying. Also, GAO reviewed selected relevant federal and state civil rights laws, and interviewed officials from Education, HHS, and Justice."

[Full text – School Bullying: Extent of Legal Protections](#)

Scientifically Based Social-Emotional Programs: A Compilation of Reviews

Heartland Area Education Agency 11, Johnston, Iowa. (2005).

"This document is meant to assist schools in choosing programs that have a high likelihood of being effective in their schools. . . . Approximately 45 programs were chosen for initial review. These programs were selected from current literature regarding effective programs (and) Area Education Agency and school staff recommendations. A literature search looking for efficacy studies regarding the specific program was conducted. In addition, each manual was reviewed for references utilized within the program. Finally, publishers and authors were contacted via e-mail and U.S. Postal Service and requested to provide efficacy and/or theory-based research studies, field studies, and any other evidence they felt pertained to the question of empirical evidence. . . . Heartland AEA 11 staff developed a rubric for measuring the level of scientifically based evidence of effectiveness. Three independent reviews using the rubric were conducted for each program. Reliability between the reviewers was verified by a group of four reviewers, randomly validating ratings provided. The rubric assisted in answering two major questions regarding programs under review: (a) What does the research tell us about effectiveness? and (b) What do we know about the quality of the program?" Programs and their components are rated at five levels: (a) Gold, (b) Silver, (c) Promising, (d) Insufficient Evidence, and (e) Anecdotal.

[Full text -- Scientifically Based Social-Emotional Programs: A Compilation of Reviews](#)

[Click on Heartland AEA 11 Goal 2 Social-Emotional Development (2005).]

Screening for Social Emotional Concerns: Considerations in the Selection of Instruments

Technical Assistance Center on Social Emotional Intervention for Young Children,
University of South Florida, Tampa. (2009). J. Henderson & P. Strain.

"This document is part of the Roadmap to Effective Intervention Practices series of syntheses, intended to provide summaries of existing evidence related to assessment and intervention for social-emotional challenges of young children. The purpose of the syntheses is to offer consumers (professionals, other practitioners, administrators, families, etc.) practical information in a useful, concise format and to provide references to more complete descriptions of validated assessment and intervention practices." The chart that begins on page 5 lists instruments with information on (a) utility; (b) social validity; (c) authenticity and equity (appropriate content, materials, methods); (d) congruence and sensitivity (psychometrics); (e) age range; (f) time (administration and scoring); (g) readability; (h) cost; (i) data management system; and several other variables.

[Full text – Screening for Social Emotional Concerns](#)

Student Behavior: Publications and Resources

What Works Clearinghouse, Institute of Education Sciences, U.S. Department of Education.
(Continuing Collection)

“The WWC review of student behavior interventions examines the evidence of effectiveness of programs, curricula, and practices whose purpose is to foster positive behavioral outcomes. Items reviewed are intended to cover (a) behavior; (b) cognition; (c) emotional/internal behavior; (d) external behavior; (e) functional abilities; (f) general academic achievement; (g) knowledge, attitudes, and values; (h) mathematics achievement; (i) reading achievement; (j) social-emotional development; and (k) social outcomes. Grade/Age Range -- PreK through High School. Population: All.” Contents cover Intervention Reports, Single Study Reviews, Practice Guides, Reference Resources, and Multimedia.

[Publications and Resources – Student Behavior](#)

Student Victimization in U.S. Schools: Results From the 2009 School Crime Supplement to the National Crime Victimization Survey

National Center for Education Statistics, U.S. Department of Education. (2011).

J. F. DeVoe & L. Bauer.

“This report uses data from the 2009 School Crime Supplement (SCS) to examine student criminal victimization and the characteristics of crime victims and non-victims. It also provides findings on student reports of the presence of gangs and weapons and the availability of drugs and alcohol at school, student reports of bullying and cyberbullying, and fear and avoidance behaviors of crime victims and non-victims at school.”

[Full text – Student Victimization in U.S. Schools](#)

Summary of Self-Management Research

Project REACH, Lehigh University, Bethlehem, Pennsylvania. (2006).

"The purpose of this literature review was to determine the effectiveness of self-management as an intervention for students with emotional and behavioral disorders (EBD). Areas of effectiveness that were evaluated include: (a) age/grade, (b) diagnosis, in addition to EBD, (c) racial/cultural background, (d) setting, (e) targeted behavior, (f) duration of evaluation, (g) procedural integrity, (h) consumer satisfaction, (i) link to assessment information, and (j) generalization. Thirty-four self-management studies were identified, with a total of 83 students. Students ranged in age from 5 to 17. . . . To date, in-depth analyses of twenty articles have been conducted. Effectiveness was assessed in three ways: effect sizes, percentage of non-overlapping data points, and percentage change in level. The indicators for all studies demonstrated improvement in the target behaviors (task engagement, appropriate/inappropriate behaviors and, secondarily, academic accuracy and productivity). . . . The study provides mean effect sizes for changes in different behaviors and academic variables. Treatment fidelity, social validity, and other factors are also discussed."

[Full text -- Summary of Self-Management Research](#)

[Also see – Summary of Functional Behavioral Assessment to Help Decrease Problem Behavior](#)

The Effectiveness of Universal School-Based Programs for the Prevention of Violent and Aggressive Behavior: A Report on Recommendations of the Task Force on Community Prevention Services.

Morbidity and Mortality Weekly Report, Centers for Disease Prevention and Control, U.S. Department of Health and Human Services. (2007).

"Universal school-based programs to reduce or prevent violent behavior are delivered to all children in classrooms in a grade or in a school. Similarly, programs targeted to schools in high-risk areas (defined by low socioeconomic status or high crime rates) are delivered to all children in a grade or school in those high-risk areas. During 2004-2006, the Task Force on Community Preventive Services conducted a systematic review of published scientific evidence concerning the effectiveness of these programs. The results of this review provide strong evidence that universal school-based programs decrease rates of violence and aggressive behavior among school-aged children. Program effects were demonstrated at all grade levels. An independent meta-analysis of school-based programs confirmed and supplemented these findings. On the basis of strong evidence of effectiveness, the Task Force recommends the use of universal school-based programs to prevent or reduce violent behavior."

[Full text -- The Effectiveness of Universal School-Based Programs](#)

The Importance of Relative Standards in ADHD Diagnoses: Evidence Based on Exact Birth Dates

Journal of Health Economics. (2010). T. Elder.

Based on analysis of data from the Early Childhood Longitudinal Study-Kindergarten Cohort, this study "presents evidence that diagnoses of Attention Deficit/Hyperactivity Disorder (ADHD) are driven largely by subjective comparisons across children in the same grade in school. Roughly 8.4 percent of children born in the month prior to their state's cutoff date for kindergarten eligibility -- who typically become the youngest and most developmentally immature children within a grade -- are diagnosed with ADHD, compared to 5.1 percent of children born in the month immediately afterward. A child's birth date relative to the eligibility cutoff also strongly influences teachers' assessments of whether a child exhibits ADHD symptoms but is only weakly associated with similarly measured parental assessments, suggesting that many diagnoses may be driven by teachers' perceptions of poor behavior among the youngest children in a classroom. These perceptions have long-lasting consequences; the youngest children in fifth and eighth grade are nearly twice as likely as their older classmates to regularly use stimulants prescribed to treat ADHD."

[Full text -- The Importance of Relative Standards in ADHD Diagnosis](#)

[Click under Published Articles. This is the author's website.]

The Positive Impact of Social and Emotional Learning for Kindergarten to Eighth-Grade Students: Findings from Three Scientific Reviews

Collaborative for Academic, Social, and Emotional Learning (CASEL), Chicago, Illinois. (2008).

J. Payton, R. P. Weissberg, J. A. Durlak, A. B. Dymnicki, R. D. Taylor, K. B. Schellinger, & M. Pachan.

"This report summarizes results from three large-scale reviews of research on the impact of social and emotional learning (SEL) programs on elementary and middle-school students -- that is, programs that seek to promote various social and emotional skills. Collectively, the three reviews included 317 studies and involved 324,303 children. SEL programs yielded multiple benefits in each review and were effective in both school and after-school settings and for students with and without behavioral and emotional problems. There were also effective across the K-8 grade range for racially and ethnically diverse students from urban, rural, and suburban settings. SEL programs improved students' social-emotional skills, attitudes about self and others, connections to school, positive behavior, and academic performance. They also reduced students' conduct problems and emotional distress. . . . In addition, SEL programming improved students test scores by 11 to 17 percentile points, indicating that they offer students a practical educational benefit."

[Full text – The Positive Impact of Social and Emotional Learning](#)

What Comes First – The Achievement or the Behavior (Problem)? Research Report

Behavior and Reading Achievement Center, University of North Carolina at Charlotte. (Circa 2009).

B. Algozzine, B. Putnam, & R. Horner.

"A relationship between academic achievement and social behavior has been widely reported. In this article, the authors describe three levels of research used to establish the association and present an analysis of it within the context of improved intervention. . . . (The paper) focuses on academic achievement and social behavior as general terms representing evidence of learning or not learning to read, write, compute, or perform other tool skills required for success in school, as well as reference to characteristics, skills, and abilities associated with demonstrating or not demonstrating 'behavior problems.' . . . With regard to achievement AND behavior, the greatest promise is in teaching young children academic and social skills at the same time and documenting the fidelity and effectiveness of doing so using direct and frequent measures of observable outcomes."

[Full text – What Comes First](#)

What Works in Prevention: Principles of Effective Prevention Programs

American Psychologist. (2003). American Psychological Association.

M. Nation, C. Crusto, A. Wandersman, K. L. Kumpfer, D. Deybolt, E. Morrissey-Kane, & K. Davino.

"The high prevalence of drug abuse, delinquency, youth violence, and other youth problems creates a need to identify, and disseminate effective prevention strategies. . . . Using a review-of-reviews approach across four areas (substance abuse, risky sexual behavior, school failure, and juvenile

delinquency and violence), the authors identified 9 characteristics that were consistently associated with effective prevention programs. Programs were (a) comprehensive, (b) included varied teaching methods, (c) provided sufficient dosage, (d) were theory driven, (e) provided opportunities for positive relationships, (f) were appropriately timed, (g) were socioculturally relevant, (h) included outcome evaluation, and (i) involved well-trained staff. This synthesis can inform the planning and implementation of problem-specific prevention interventions, provide a rationale for multi-problem prevention programs, and serve as a basis for further research.”

[Abstract – What Works in Prevention](#)

[Full text for purchase]

What Works to Prevent or Reduce Internalizing Problems or Socio-Emotional Difficulties in Adolescents: Lessons from Experimental Evaluations of Social Interventions

Child Trends, Washington DC. (2011). M. Terzian, K. Hamilton, & S. Ericson.

"This synthesis presents lessons learned from 37 random-assignment social intervention programs for adolescents that are designed to prevent or treat internalizing problems. Programs were identified by searching LINKS (Lifecourse Interventions to Nurture Kids Successfully), Child Trends' online database of rigorously evaluated social interventions for children and youth. All interventions included in LINKS are social interventions evaluated using random assignment, intent-to-treat evaluations. . . . Findings from this literature review suggest that social interventions to address internalizing problems are most effective when they teach adolescents how to cope with negative thoughts and emotions, solve problems, and interact effectively with others. Therapeutic approaches, such as family therapy, group therapy, individual therapy, and treatment-focused, school-based approaches appear to be effective. Mixed results were found for programs including activities to increase self-esteem and programs directed at non-clinical populations of youth. Among a handful of studies reviewed, programs with a mentoring component and programs targeting only females, although found to improve certain outcomes, were not found to ameliorate internalizing symptoms."

[Full text – What Works to Prevent or Reduce Internalizing Problems](#)

[Also see – What Works for Acting-Out \(Externalizing\) Behavior: Lessons from Experimental Evaluations of Social Interventions](#)

[Click on the title under Program Outcome]



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