Adapting the Incredible Years® Dina Dinosaur Small Group Program for School Implementation: Promoting Self-Regulation Skills

Doré R. LaFerret, Desiree W. Murray, & Jessica J. Reed
Frank Porter Graham Child Development Institute
University of North Carolina at Chapel Hill

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Presentation Objectives
1. List 3 key considerations for adapting a clinic-based treatment program, Incredible Years® (IY) Dina Dinosaur program, for a school setting
2. Name 3 developmentally appropriate methods for teaching self-regulation skills to young children
3. Describe data-driven “lessons learned” from the delivery of IY Dina in a school setting

The Significance of Delivering Mental Health Services in Schools
• 1 in 5 students has a diagnosable emotional or behavioral disorder; only 20% of these will receive any treatment
• Schools are ideal settings for enhancing access to mental health services, but fewer than half provide specific mental health programs
• Programs are often not evidence-based
• Evidence-based programs are often not delivered at full dosage, are not well-integrated into schools, and school staff receive little training

Potential Advantages of School-Based Delivery of Clinic-Based Social-Emotional Programs
• Access to students allows for more frequent meetings than typically once per week clinic visits
• More opportunities for skills instruction & reinforcement
• Ideal for learning in young children
• May facilitate prompting & reinforcement of child skills throughout the day by school staff
• May provide opportunities for mental health staff to support positive school climate in the classroom & school
• May enhance effects of small group skills training for students

The Incredible Years® Dina Dinosaur small group treatment program:
Adaptations for delivery in schools & considerations for implementation

Disclosures
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Self-Regulation Skills for Success (SRSS) Study

**Objective**
- Evaluate the Incredible Years® Dina Dinosaur Treatment program
- Delivered in schools for 1st & 2nd graders with self-regulation difficulties
- Outcomes compared to services as usual in RCT design:
  - Self-regulation skills (inhibitory control, emotion regulation, executive functioning)
  - Disruptive and disengaged classroom behavior, discipline referrals
  - Learning behaviors, academic competence, and report card grades
  - Peer interactions and social competence

**Context**
- To date, 9 diverse schools in 4 districts in central NC
- 5 low-income, high minority schools in urban district (78-100% F/R lunch)
- 3 rural socio-demographically diverse schools (28-79% F/R lunch)
- 1 well-resourced school in university community
- 118 students randomized (59 intervention)
  - SDQ Total Difficulties > 12 (at-risk)
  - 66% male
  - 50% AA, 14% Latinx, 70% F/R lunch
- 12 intervention groups

The Incredible Years® Dina Dinosaur Treatment Program

- Developed for delivery in clinics:
  - Small groups of 4-6 children meet weekly with 2 therapists
  - 18-20 weeks of 2 hour sessions, delivered with parent program
  - Teacher consultation recommended
- Instructional Methods:
  - Developmentally appropriate active learning strategies:
    - Puppets, videos, role-plays, and small group activities
- Students learn:
  - How to be successful in school
  - Understanding feelings in self and others
  - Calming down when upset or frustrated
  - Getting along with friends and problem-solving

SRSS Adaptations for Schools

- Co-leader model: SRSS mental health staff partner with school counselors to deliver
- Delivery structure: Twice weekly 45 minute sessions during non-core instructional time
  - 27 vs. 36 hours of targeted session time
  - Very little difference in session content with exceptions of omitting “coached play” and possibly fewer vignettes
- Intervention supports for skill generalization:
  - Recess coaching (adds “dosage”)
  - Teacher in-service meetings, consultation
  - Parent educational meetings, phone calls

Implementation Considerations for School Delivery

- Scheduling & space
- Group composition
- Variability in school counselor skills
- Teacher stress/School climate
- Alignment between program philosophy and school policy

Implementation Supports to Address Challenges

- Monthly “touching” in a Professional Learning Community (PLC)
- Regular and proactive communication with school leadership
- Developed relationships with school district liaisons
Demonstration:

Developmentally-appropriate methods for teaching self-regulation skills to young kids

Video Demonstration

- Which teaching strategies did you observe the group leaders using?
- How effective were these strategies?
- What did you notice about the way the group leaders interacted with the students?

Live Demonstration – Teaching Ignoring

Lessons Learned:

What data can tell us about our IY delivery in schools

Preliminary Implementation Data*

- Child Group Sessions:
  - Average of 36 sessions to complete all 18 lessons (range = 32-40)
  - 90% student attendance across 10 groups and 9 schools (range 15%-100% across students)
  - 4 of 59 students did not participate/dropped out of the program
- Parent Attendance at 2-3 Meetings:
  - 33-43% attendance rate (71% of parents came at least once)
- Recess Coaching:
  - Average of 14 recess coaching sessions per student (range = 2-20)
- Teacher Consultation:
  - Average of 6 contacts per teacher (range = 2-11)
- Teacher In-service:
  - Ave 4.6 teachers/school at each session (20% without students in program)

*Based upon ITT model including 4 drop outs

Fidelity

<table>
<thead>
<tr>
<th>Group Leader Adherence Report</th>
<th>Independent Expert Ratings of Session Quality*</th>
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<tbody>
<tr>
<td>% of session content completed across 12 groups</td>
<td>% of session content completed across 12 groups</td>
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<td>% of session content completed across 12 groups</td>
<td>% of session content completed across 12 groups</td>
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1 = not at all, 3 = sometimes, 5 = frequently/extremely well

*Based on 12 ratings from Cohort 1
Counselors’ Perceived Benefits to their Learning and Work

- Increasing skills to manage behavior and praise and ignore students more effectively.
- Gaining understanding of challenging students and how to teach them social-emotional skills in “fun” ways.
- Suggesting more effective strategies to teachers for challenging kids.
- Modeling effective strategies for teachers.
- Using intervention materials as part of classroom guidance.

What Do Counselors Who Have Participated Think?

<<<video clip>>>

Paired Discussion: Implementation Lessons

Turn to your partner & discuss:

- What “lessons learned,” key points, or themes do you see from our implementation experience?
- How are your experiences with delivering school-based mental health services similar or different?

Research Team: Implementation Lessons

- Adaptations and supports are helping integration into schools; may enhance effectiveness.
- Fidelity can be maintained with significant implementation supports.
- Counselor capacity for SEL interventions is increasing, likely enhancing broader impact.
Additional Considerations for School-Based Delivery

• External supports for school delivery may be needed for full fidelity
  • Consider conjoint delivery with contracted mental health consultants

• Modifications for practice
  • Strategically select students and consider group composition
  • Deliver shorter modules matched to domains of student impairment
  • Smaller groups with school counselor

General Discussion

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