Raising Healthy Children

A Social Development Approach to Prevention

Blueprints Conference| March 18, 2008

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Session Objectives

- Understand the research foundation of Raising Healthy Children.
- Identify the key components of the Raising Healthy Children program.
- Identify the long term outcomes from the Seattle Social Development Project's test of Raising Healthy Children.
- Understand what it takes to implement Raising Healthy Children.

Research Advances in Prediction

- Longitudinal studies have identified the predictors of positive outcomes like success in school…
- As well as the predictors of substance abuse, violence, and other problem behaviors that interfere with student learning.

Risk Factors for Adolescent Problem Behaviors

Risk Factors	Substance Abuse	Delinquency	Teen Pregnancy	School Drop-Out	Violence	Depression & Anxiety
Family						
Family History of the Problem Behavior	➳	➳	➳	➳	➳	➳
Family Management Problems	➳	➳	➳	➳	➳	➳
Family Conflict	➳	➳	➳	➳	➳	➳
Favorable Parental Attitudes and Involvement in the Problem Behavior	➳	➳			➳	

Risk Factors for Adolescent Problem Behaviors

Risk Factors	Substance Abuse	Delinquency	Teen Pregnancy	School Drop-Out	Violence	Depression & Anxiety
School						
Academic Failure Beginning in Late Elementary School	➳	➳	➳	➳	➳	➳
Lack of Commitment to School	➳	➳	➳	➳	➳	

Risk Factors for Adolescent Problem Behaviors

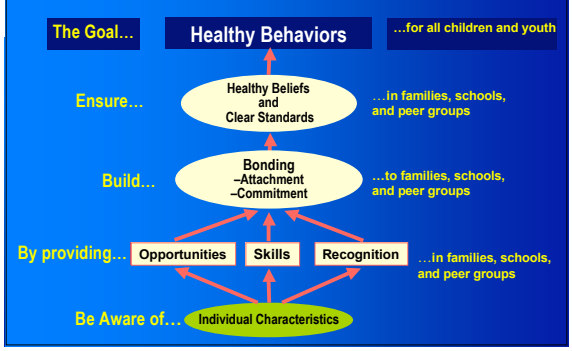
Risk Factors	Substance Abuse	Delinquency	Teen Pregnancy	School Drop-Out	Violence	Depression & Anxiety
Individual/Peer						
Early and Persistent Antisocial Behavior	➳	➳	➳	➳	➳	➳
Rebelliousness	➳	➳		➳		
Friends Who Engage in the Problem Behavior	➳	➳	➳	➳	➳	
Favorable Attitudes Toward the Problem Behavior	➳	➳	➳	➳		
Early Initiation of the Problem Behavior	➳	➳	➳	➳	➳	
Constitutional Factors	➳	➳			➳	➳

Protective Factors

Individual Characteristics
- High Intelligence
- Resilient Temperament
- Competencies and Skills (Cognitive, Social and Emotional)

In each social domain (family, school, peer group and neighborhood)
- Prosocial Opportunities
- Reinforcement for Prosocial Involvement
- Bonding (Attachment and Commitment)
- Healthy Beliefs and Clear Standards

The Social Development Strategy



Social development in a parent child interaction.

Parent-Child Interaction Coded for

Opportunities
Involvement
Rewards
Bonding

etc.

Twenty Seven Years of Research on the Raising Healthy Children Program

- 1981-1987--Seattle Social Development Project in Seattle Public Schools
- 1985--1992--Raising Healthy Children in Renton Public Schools
- 1993-2005--Raising Healthy Children in Edmonds Public Schools
- 2000-2002--Raising Healthy Children in Everett, WA
- 2001-2003--Raising Healthy Children in Inkster, MI
- 2006-present--Raising Healthy Children in Bedford County, PA

Seattle Social Development Project, Raising Healthy Children in Elementary School

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Risk Factors Addressed

	Risk Factors	Substance Abuse	Delinquency	Teen Pregnancy	School Drop-Out	Violence	Depression & Anxiety
	Family						
Family	Family History of the Problem Behavior	✓	✓	✓	✓	✓	✓
X	Family Management Problems	✓	✓	✓	✓	✓	
X	Family Conflict	✓	✓	✓	✓	✓	✓
X	Favorable Parental Attitudes and Involvement in the Problem Behavior	✓	✓			✓	
	School						
School X	Academic Failure Beginning in Late Elementary School	✓	✓	✓	✓	✓	✓
X	Lack of Commitment to School	✓	✓	✓	✓	✓	
	Individual/Peer						
Individual/Peer X	Early and Persistent Antisocial Behavior	✓	✓	✓	✓	✓	✓
	Alienation and Rebelliousness	✓	✓		✓		
X	Friends Who Engage in the Problem Behavior	✓	✓	✓	✓	✓	
X	Favorable Attitudes Toward the Problem Behavior	✓	✓	✓	✓		
X	Early Initiation of the Problem Behavior	✓	✓	✓	✓	✓	
	Constitutional Factors	✓	✓			✓	✓

Intervention Components

- Component One:
  Teacher Training in Classroom Management and Instruction
- Component Two:
  Parent Training in Behavior Management and Academic Support
- Component Three:
  Child Social, Cognitive and Emotional Skill Development

SSDP Intervention Component: Teacher In-Service

Proactive classroom management (grades 1-6)

- Establish consistent classroom expectations and routines at the beginning of the year
- Give clear, explicit instructions for behavior
- Recognize and reward desirable student behavior and efforts to comply
- Use methods that keep minor classroom disruptions from interrupting instruction

Effective Direct Instruction (grades 1-6)

- Assess and activate foundation knowledge before teaching
- Teach to explicit learning objectives
- Model skills to be learned
- Frequently monitor student comprehension as material is presented
- Re-teach material when necessary

Cooperative learning (grades 1-6)

- Involve small teams of students of different ability levels and backgrounds as learning partners
- Provide recognition to teams for academic improvement of individual members over past performance

Insert pictures

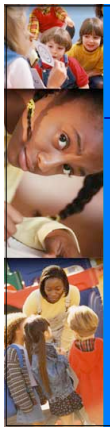
Bonding and Connecting Video

Parent Programs

Raising Healthy Children (grades 1-2)
- Observe and pinpoint desirable and undesirable child behaviors
- Teach expectations for behaviors
- Provide consistent positive reinforcement for desired behavior
- Provide consistent and moderate consequences for undesired behaviors

Supporting School Success (grades 2-3)
- Initiate conversation with teachers about children's learning
- Help children develop reading and math skills
- Create a home environment supportive of learning

Guiding Good Choices (grades 5-6)
- Establish a family policy on drug use
- Practice refusal skills with children
- Use self-control skills to reduce family conflict
- Create new opportunities in the family for children to contribute and learn



Social, Cognitive and Emotional Skills Training

- Listening
- Following directions
- Social awareness (boundaries, taking perspective of others)
- Sharing and working together
- Manners and civility (please and thank you)
- Compliments and encouragement
- Problem solving
- Emotional regulation (anger control)
- Refusal skills

Social Skills Video

Seattle Social Development Project Design

- Initiated in 1981 in 8 Seattle elementary schools.
- Expanded in 1985, to include 18 Seattle elementary schools to add a late intervention condition and additional control students.
- Quasi-experimental study
  - Full treatment (grades 1-6) = 149
  - Late treatment (grades 5-6) = 243
  - Control = 206
- 77% of the 5th grade students constitute the longitudinal study sample.

SSDP: Gender, Ethnicity & SES

- **Gender**

Female	396	49%
Male	412	51%

- **Ethnic Group**

European-American	381	47%
African-American	207	26%
Asian-American	177	22%
Native-American	43	5%
of these were Hispanic	44	5%

- **SES**

Eligible for free/reduced lunch (5th,6th or 7th)	423	52%

SSDP Panel Retention

Data have been collected on these Seattle youths and their parents from 1985 to 2006 (age 30).

	Elementary			Middle		High				Adult			
MEAN AGE G2	10	11	12	13	14	15	16	(17)	18	21	24	27	30
N	808	703	558	654	778	783	770	--	757	766	752	747	720
%		87%	69%	81%	96%	97%	95%	--	94%	95%	93%	93%	91%

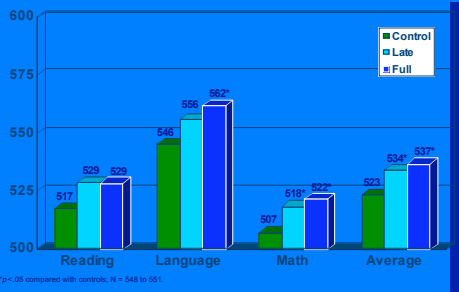
Interview completion rates for the sample have remained above 90% since 1989, when subjects were 14 years old.

SSDP Intervention Effects Compared to Controls

At the end of the 2nd grade
- boys less aggressive
- girls less self-destructive

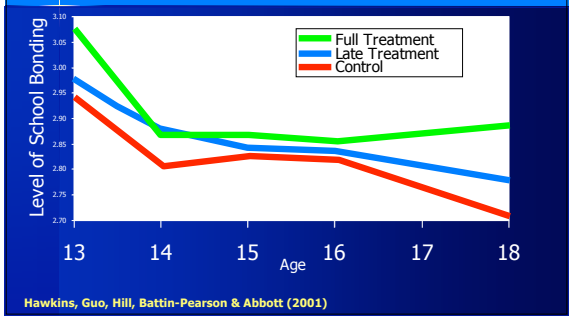
By the start of 5th grade, those in the full intervention had
- less initiation of alcohol
- less initiation of delinquency
- better family management
- better family communication
- better family involvement
- higher attachment to family
- higher school rewards
- higher school bonding

Seattle Social Development Project Effects at Age 12: California Achievement Test Scores



*p<.05 compared with controls; N = 548 to 551.

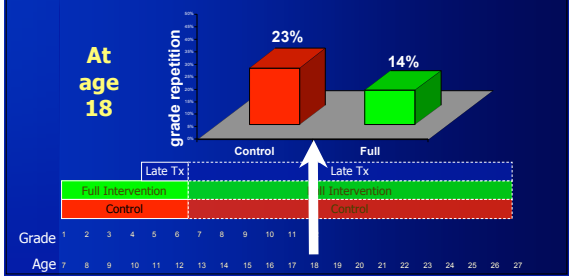
Effects of SSDP Intervention on School Bonding from Age 13 to 18



Hawkins, Guo, Hill, Battin-Pearson & Abbott (2001)

SSDP Intervention Effects Compared to Controls

Hawkins, et al. (1999)



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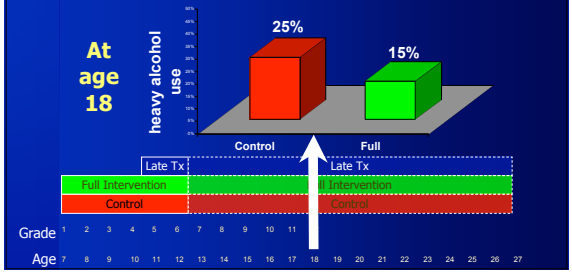

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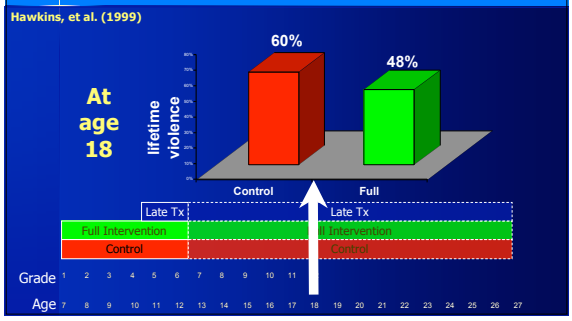
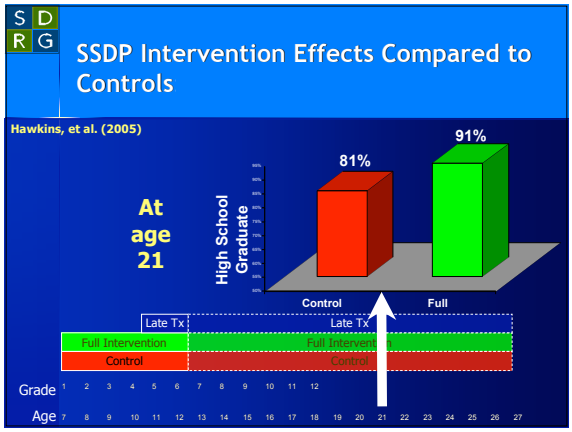
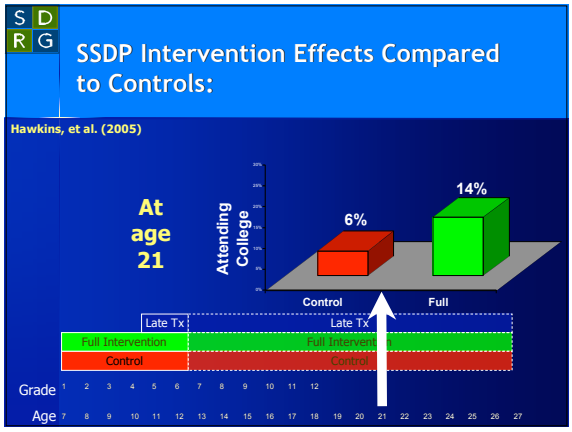


SSDP Intervention Effects Compared to Controls

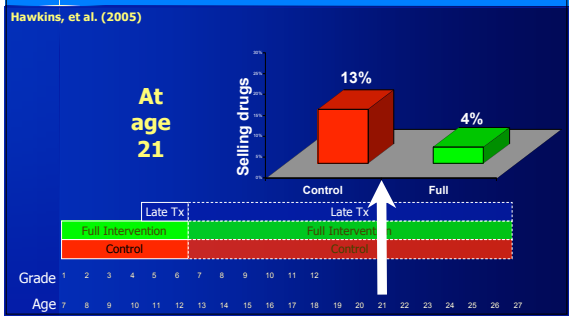


SSDP Intervention Effects Compared to Controls:



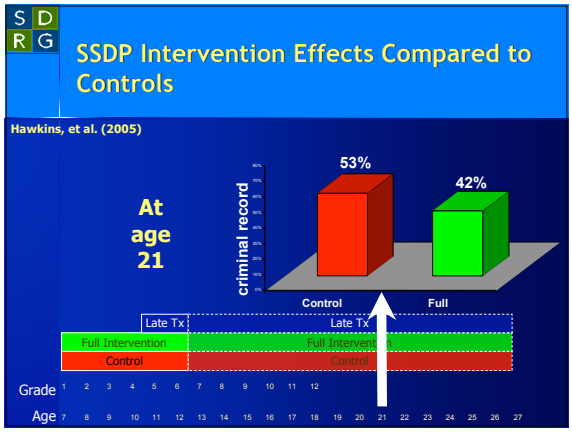
SSDP Intervention Effects Compared to Controls

Hawkins, et al. (2005)



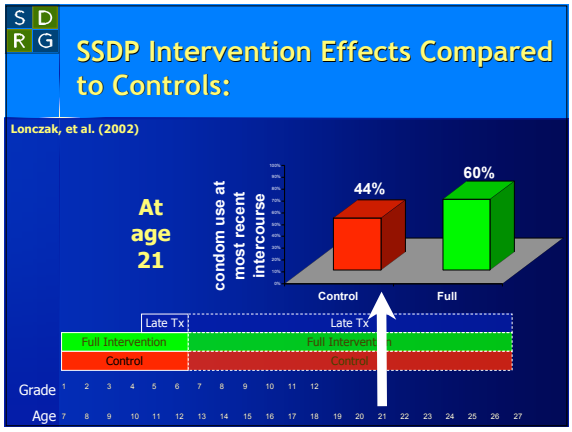
SSDP Intervention Effects Compared to Controls

Hawkins, et al. (2005)



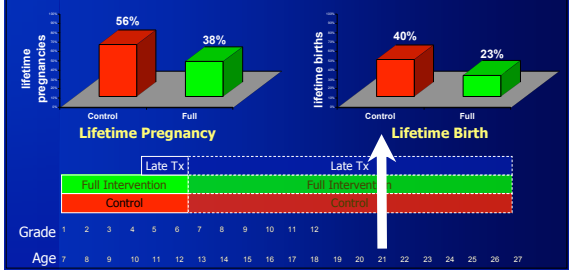
SSDP Intervention Effects Compared to Controls:

Lonczak, et al. (2002)



SSDP Intervention Effects Compared to Controls:

Among Females At age 21



Seattle Social Development Project Summary of Long Term Outcomes

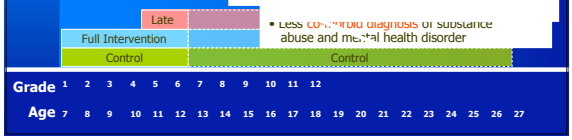
By age 18 Youths in the Full Intervention had

- less heavy alcohol use
- le
- le
- fe
- in
- in

By age 27, significant effects were found on educational and occupational outcomes mental health and risky sexual activity:

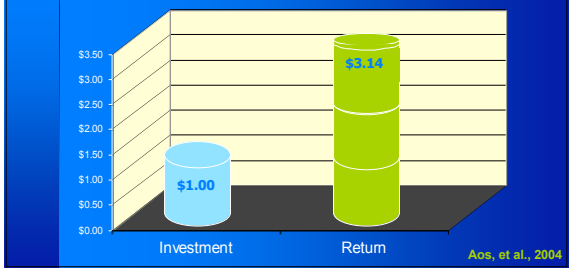
- **more** above median on SES attainment index
- **fewer** mental health disorders and symptoms
- **fewer** lifetime sexually transmitted diseases

- Less co-morbid diagnosis of substance abuse and mental health disorder



Cost-Benefit

An independent cost-benefit analysis by Washington State Institute for Public Policy estimated that projected benefits resulting from the SSDP intervention effects observed through age 21 would produce a net positive return per participant.



Aos, et al., 2004

Seattle Social Development Project Conclusion

Full intervention in grades 1-6 was more effective than late intervention (grades 5-6).

Conclusions from SSDP test of Raising Healthy Children

- In the elementary years, parents and teachers can make a demonstrable difference that lasts into adulthood using the Raising Healthy Children program.
- Increasing opportunities, skills and recognition for children in the elementary grades can put more children on a positive developmental path.

Raising Healthy Children Training System

Staff Development
Year One

Summer
- Implementation Team Training

Fall
- Workshop Leader Trainings for RHC, SSS, & GGC
- Proactive Management

Winter
- Social & Emotional Skills Workshop

Spring
- Teacher coaching and support

Staff Development
Year Two

Summer
- Implementation team training

Fall
- Instructional Strategies—Direct Instruction
- Teacher coaching and support

Winter
- Instructional Strategies—Cooperative Learning
- Instructional Strategies—Motivation
- Teacher coaching and support

Spring
- Teacher coaching and support

Staff Development
Year Three

Summer
- Implementation team training and capacity building

Fall
- New teacher training

Winter
- Refresher training
- Teacher coaching and support

Spring
- Teacher coaching and support

Support Structures

- School Staff
  - Implementation team training
  - 7 days of teacher training
  - Coaching
  - Principal support
- Family
  - Training in each parenting curriculum

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References

Catalano, R. F., & Hawkins, J. D. (1996). The social development model: A theory of antisocial behavior. In J. D. Hawkins (Ed.) *Delinquency and crime: Current theories* (pp. 149-197). New York: Cambridge University Press.

Hawkins, J. D., Catalano, R. F., Kosterman, R., Abbott, R., & Hill, K. G. (1999). Preventing adolescent health-risk behaviors by strengthening protection during childhood. *Archives of Pediatrics and Adolescent Medicine, 153*, 226-234.

Hawkins, J. D., Catalano, R. F., Morrison, D. M., O'Donnell, J., Abbott, R. D., & Day, L. E. (1992). The Seattle Social Development Project: Effects of the first four years on protective factors and problem behaviors. In J. McCord & R. E. Tremblay (Eds.), *Preventing antisocial behavior: Interventions from birth through adolescence* (pp. 139-161). New York: Guilford Press.

Hawkins, J. D., Guo, J., Hill, K. G., Battin-Pearson, S., & Abbott, R. D. (2001). Long-term effects of the Seattle Social Development intervention on school bonding trajectories. *Applied Developmental Science: Special Issue: Prevention as altering the course of development, 5*, 225-236.

Hawkins, J. D., Kosterman, R., Catalano, R. F., Hill, K. G., & Abbott, R. D. (2005). Promoting positive adult functioning through social development intervention in childhood: Long-term effects from the Seattle Social Development Project. *Archives of Pediatrics and Adolescent Medicine, 159*, 25-31.

Hawkins, J. D., Kosterman, R., Catalano, R. F., Hill, K. G., & Abbott, R. D. (under review). Effects of Social Development Intervention in Childhood Fifteen Years Later. *Archives of Pediatrics and Adolescent Medicine*.

Hawkins, J. D., Smith, B. H., Hill, K. G., Kosterman, R., Catalano, R. F., & Abbott, R. D. (2007). Promoting social development and preventing health and behavior problems during the elementary grades: Results from the Seattle Social Development Project. *Victims & Offenders, 2*, 161-181.

Hawkins, J. D., Von Cleve, E., & Catalano, R. F., Jr. (1991). Reducing early childhood aggression: Results of a primary prevention program. *Journal of the American Academy of Child and Adolescent Psychiatry, 30*, 208-217.

Hawkins, J. D., & Weis, J. G. (1985). The social development model: An integrated approach to delinquency prevention. *Journal of Primary Prevention, 6*, 73-97.

Lonczak, H. S., Abbott, R. D., Hawkins, J. D., Kosterman, R., & Catalano, R. F. (2002). Effects of the Seattle Social Development Project on sexual behavior, pregnancy, birth, and sexually transmitted disease outcomes by age 21 years. *Archives of Pediatrics and Adolescent Medicine, 156*, 438-447.