

First Step To Success steps up in Albuquerque schools

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Hill Walker, an education professor at the University of Oregon, led development of First Step for Success, and has explored its effectiveness in schools around the world. Credit: University of Oregon

A school-based behavioral intervention program developed under a federal grant in the mid-1990s at the University of Oregon, already in widespread use, now has shown real value on a complex stage, scoring robust improvements among at-risk elementary students in the predominantly minority Albuquerque, N.M., school district.

The program First Step to Success was developed to target kindergarten through third-grade students who either display an [antisocial behavior](#) pattern or show clear signs of developing one. Some \$22 million in federal grants have been invested in the program, which is used in schools across the [United States](#) and internationally. A goal of First Step is to prepare students for success at the middle and high [school](#) levels.

Results of the four-year, \$4.5 million Albuquerque study -- funded by the U.S. Department of Education's Institute of Education Sciences -- appear in the December issue of the Journal of Emotional and Behavioral Disorders. The study targeted first-through-third-grade students over a three-year intervention and follow-up period. The school district's approximately 90,000-student body is 72 percent minority, including Hispanic (57 percent), black, Native American, Asian, multiracial and Pacific Islanders.

A nine-member research team led by Hill M. Walker, a UO education professor who developed First Step, reported effect-size measures ranging from .54 to .87. Effect size is a complex computational analysis used in social sciences to test the strength of an apparent relationship. A measure above .80 is considered robust. Below .50 means things didn't work out.

The study was a cooperative effort that, in addition to Walker, included researchers from the Eugene-based Oregon Research Institute, a nonprofit institution that studies human behavior, the University of New Mexico and the University of California, Los Angeles.

In the March issue of the journal School Mental Health, the researchers also reported that the First Step intervention in Albuquerque led to a significant impact for a small subset of 42 participating students identified with attention deficit hyperactivity disorder. ADHD affects 5 to 10 percent of school-age children in the United States. Effect sizes for ADHD kids who received First Step attention was .96 for reducing disruptive behavioral symptoms and .91 for social functioning. For academic functioning, the effect size was a moderate .67.

"Albuquerque was the first opportunity we had to mount a large-scale study of the program using a randomized control group, the gold

standard for research," said Walker, co-director of the UO Institute on Violence and Destructive Behavior and a researcher at the Oregon Research Institute. "First Step has been implemented widely, but not in this way."

In the study, 200 at-risk students were randomly divided into an experimental group that received intervention or a control group receiving normal care. Researchers were able to identify, with help from school officials, at-risk students who were entering early elementary grades unprepared for a school culture where sharing, cooperation, discipline, paying attention to and respecting teachers, and following instructions are vital. These students, Walker said, often come from environments where escalation, coercion and violence are often used to get things done.

"Research shows that if you can put together a comprehensive intervention that involves a partnership among the three social agencies most important in a child's life -- parents, teachers and peers -- then you have a chance to get them off this path," Walker said. "If we can get these kids engaged in school, then school success serves almost like a vaccine. Students who make school a big part of their lives have many fewer incidents of drinking, drug use, violence, delinquency and sexually transmitted diseases both in and out of school."

Behavior improvements were found across several measures, including in-class responsiveness, peer interactions, referrals to the principal's office and teacher and parental ratings of the children.

A key tactic used in First Step is teacher use of a two-sided color card. Teachers show the green side when a targeted child is behaving properly or the red side when rules are being violated. All students in the classroom are aware of who targeted kids are and have a role in quietly reinforcing and supporting the interventions. Targeted children score

points and are rewarded, individually and as a class, for meeting each threshold. When daily points are not met, the student's daily point goal reverts to the previously successful day.

Parents, who are enlisted as partners in First Step efforts, also are counseled and urged to support the school-day efforts with at-home activities that reinforce school communications, cooperation, limit-setting, problem-solving, the importance of having friends and developing confidence.

First Step involves three components -- screening, school intervention and parent training -- and lasts about three months. A behavioral coach, who may be a school counselor, behavior specialist or social worker, coordinates it. The Albuquerque study involved a year to hire, train and plan the intervention's logistics. Implementation occurred during 2005-2006 and 2006-2007 school years. Year four was devoted to assessments and establishing procedures to sustain the process. The post-analysis found that carryover from one year to the next was weaker than anticipated, prompting a need to re-evaluate steps to achieve continuity, Walker said.

Albuquerque parents, Walker said, reported reductions of undesired behavior and general improvement in their children's functioning. A small proportion of teachers, however, complained the program required too much time and effort; teachers were required to complete detailed daily scoring sheets in addition to monitoring behavior as it occurred.

In the School Mental Health paper, the researchers noted that First Step's impact on kids with ADHD in the students' homes was not significant but it suggests potential clinical relevance due to reduced problem behavior that might occur outside of school activities. They noted that the First Step approach naturally incorporates ADHD strategies, including individually tailored attention that provides token

reinforcement, response cost (the prospect of losing something desired as a result of inappropriate behavior), peer involvement, daily report cards and parent training.

More information: *Journal of Emotional and Behavioral Disorders* (December 2009 issue): ebx.sagepub.com/content/vol17/issue4/

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