

SCIENCE-BASED PROGRAMS LIST – NREPP RATING ANALYSIS

PRIMARY PROJECT

Primary Project (formerly the Primary Mental Health Project, or PMHP) is a school-based program designed for early detection and prevention of school adjustment difficulties in children 4-9 in preschool through 3rd grade. The program begins with screening to identify children with early school adjustment difficulties (e.g., mild aggression, withdrawal, and learning difficulties) that interfere with learning. Following identification, children are referred to a series of one-on-one sessions with a trained paraprofessional who utilizes developmentally appropriate child-led play and relationship techniques to help adjustment to the school environment. Children generally are seen weekly for 30-40 minutes for 10-14 weeks. During the session, the trained child associate works to create a nonjudgmental atmosphere while establishing limits on the length of sessions, aggression toward self or others, and destruction of property. Targeted outcomes for children in Primary Project include increased task orientation, behavior control, assertiveness, and peer social skills. The program is suitable for implementation in a specially designed place on a school campus equipped with expressive toys and materials (art media, building toys, imaginative toys).

PROGRAM REQUIREMENTS

- Universal, selective, and/or indicated prevention program
- Targets one or more alcohol, tobacco, drug, disruptive behavior, and/or violence outcomes
- Targets students in one or more grades K-12

Does this program meet the minimum program requirements for inclusion on the Science-Based Programs List?

- YES** This indicated and universal mental health and violence prevention program targets pre-K through grade 3.
- NO**

RESEARCH RATINGS FOR BEHAVIORAL OUTCOMES

Quality of Research Ratings by Criteria (0.0-4.0 scale)

| Outcome | Reliability | Validity | Fidelity | Missing Data/Attrition | Confounding Variables | Data Analysis | Overall Rating |
|-----------------------------------|-------------|----------|----------|------------------------|-----------------------|---------------|----------------|
| Outcome 1: Task orientation | 3.0 | 3.5 | 2.5 | 3.5 | 3.5 | 4.0 | 3.3 |
| Outcome 2: Behavior control | 3.0 | 3.5 | 3.0 | 3.5 | 3.0 | 4.0 | 3.3 |
| Outcome 3: Adaptive assertiveness | 3.0 | 3.5 | 2.5 | 3.5 | 3.0 | 4.0 | 3.3 |
| Outcome 4: Peer sociability | 3.0 | 3.5 | 2.5 | 3.3 | 2.8 | 4.0 | 3.2 |

Outcome 2: Behavior control

Behavior control incorporated such factors as "acting out," aggression, tolerance for frustration, willingness to follow school rules, and disruptive behavior. This outcome was measured by nine subscales constructed from various instruments. The instruments included: (1) the Classroom Adjustment Scale (CARs) and

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Health Resources Inventory (HRI), which include subscales for acting out, frustration tolerance, and follows rules; (2) the Teacher Child Rating Scale (T-CRS), a substitute for teacher completion of the CARS and HRI that includes scales for acting out and frustration tolerance; (3) the [Mental Health] Professional Termination Report (PTR), which includes an item for disruptive behavior; (4) the [Mental Health] Professional Summary Report (PSR), which includes items for frustration tolerance and acting out/aggressive; and (5) the Aides Status Evaluation Form (ASEF), which includes a factor for behavior control described as acting out (10 items). Results for this outcome were mixed across multiple evaluations. However, most results showed that the intervention improved most elements of behavior control. One evaluation that combined seven consecutive annual cohorts of children found that children significantly improved on five subscales of behavior control measured by the CARS, HRI, PTR, and ASEF ($p < .05$). In addition, statistically significant improvement occurred in at least 5 of the 7 years for three of the five subscales ($p < .05$), the exception being the acting out subscales of the CARS and ASEF. Two other evaluations found overall improvement in behavior control, as measured by the frustration tolerance subscale of the HRI, at follow-up 2 to 5 years after the program ($p < .01$). Similar results were not obtained for the acting out and follows rules subscales. In a separate evaluation, a sample of students who participated in the Primary Project program showed better behavior control than a group of least-adjusted students who did not participate in the program as measured by the acting out, follows rules, and frustration tolerance subscales of the CARS and HRI ($p < .001$). Similarly positive findings using different measures of behavior control (T-CRS and PSR scales) were reported among more than 27,000 students in 185 schools during the 1994-95 academic year. An evaluation conducted simultaneously in three school districts found that participation in Primary Project was found to be associated in greater frustration tolerance as measured by the T-CRS, even after accounting for student gender and variation in baseline scores ($p < .001$). Change in the values for the acting out item of the T-CRS did not achieve statistical significance.

| Criteria | Reliability | Validity | Fidelity | Missing Data/Attrition | Confounding Variables | Data Analysis | Study Design |
|---------------|-------------|----------|----------|------------------------|-----------------------|---------------|---|
| Rating | 3.0 | 3.5 | 3.9 | 3.5 | 3.0 | 4.0 | Experimental, Quasi-experimental, and Preexperimental |
| Meets Minimum | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |

Outcome meets minimum standard for all criteria

Outcome 4: Peer sociability

Peer sociability was measured using four subscales constructed from four instruments (see Outcome 1 for additional details about when and by whom each instrument was completed). The instruments included: (1) the Health Resources Inventory (HRI), which includes a 10-item subscale for peer sociability; (2) the Teacher Child Rating Scale (T-CRS), a substitute for teacher completion of the CARS and HRI that includes a subscale for peer sociability; (3) the [Mental Health] Professional Termination Report (PTR), which includes an item devoted to social skills with peers; and (4) the [Mental Health] Professional Summary Report (PSR), which includes a specific component on peer social skills. Across multiple evaluation designs, the Primary Project was found to be effective in improving peer sociability. One evaluation of program effects that combined seven consecutive annual cohorts of children indicated that children improved on the peer sociability subscale of the HRI ($p < .001$). Statistically significant improvement occurred individually in each of the 7 years ($p < .001$). Results at follow-up 2 to 5 years after the program were mixed: one analysis found no statistically significant difference in peer sociability between former participants in the Primary Project and other students, while another analysis found retention of the peer sociability benefits ($p < .001$). Positive findings using different measures of peer sociability (T-CRS and PSR scales) were reported among more than 27,000 students in 185 schools during the 1994-95 academic year. An evaluation conducted simultaneously in three school districts found that participation in Primary Project was associated with student improvement in peer sociability as measured by the T-CRS, even after accounting for student gender and variation in baseline scores ($p < .001$). Two additional evaluations found statistically significant improvement using the T-CRS subscales of peer sociability ($p < .01$).

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| Criteria | Reliability | Validity | Fidelity | Missing Data/Attrition | Confounding Variables | Data Analysis | Study Design |
| Rating | 3.0 | 3.5 | 2.5 | 3.3 | 2.8 | 4.0 | Experimental, Quasi-experimental, and Preexperimental |
| Meets Minimum | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | |

Outcome meets minimum standard for all criteria

Do this program’s NREPP ratings meet the minimum research ratings for inclusion on the Science-Based Programs List?

- YES** NREPP reports at least one behavioral outcome related to tobacco use, alcohol and other drug use, disruptive behavior, and/or violence for Primary Project. Of these behavioral outcomes related to disruptive behavior, at least one is rated at or above the minimum standards on all criteria.
- NO**