



*Effective Substance Abuse and
Mental Health Programs
for Every Community*

Early Risers: Skills for Success

Early Risers is a multicomponent, high-intensity, competency-enhancement program that targets elementary school children 6 to 12 years old at high risk for early development of conduct problems, including substance use. Early Risers is based on the premise that early, comprehensive, and sustained intervention is necessary to target multiple risk and protective factors. The program uses a full-strength intervention model with two complementary components to move high-risk children onto a more adaptive developmental pathway. Interventions include:

- Child social skills training and strategic peer involvement
- Reading and math instruction and educational enrichment activities
- Family support, consultation, and brief interventions to cope with stress
- Proactive parent-school consultation
- Contingency management of aggressive, disruptive, and noncompliant child behavior

The enhanced competence gained through Early Risers leads to the development of positive self-image, independent decisionmaking, healthy problem solving, assertive communication, and constructive coping. Once acquired, these attributes and skills collectively enable youth to resist personal and social forces that encourage early substance use and potential abuse and dependency.

INTENDED POPULATION

Early Risers is a prevention program for children 6 to 10 years old and their families. Original participants were primarily Whites residing in semi-rural communities. Subsequent replications of the program have

Proven Results*

- Significant gains in social competence including improved social skills and social adaptability
- Significant gains in academic achievement
- Children with the most severe aggressive behavior showed significant reductions in self-regulation problems
- Children whose parents achieved recommended levels of participation reported less parental distress and improved methods for disciplining children

** Relative to comparisons. Different tests focus on changes over time between program and control.*

INTERVENTION

Universal

Selective

Indicated



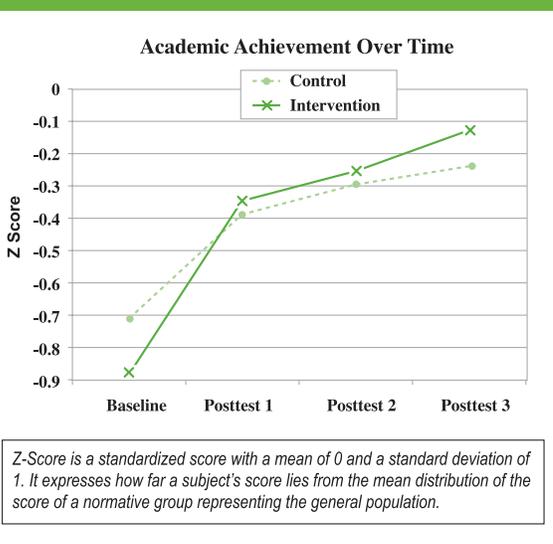
U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
Substance Abuse and Mental Health Services Administration
Center for Substance Abuse Prevention
www.samhsa.gov

OUTCOMES

High-risk children whose parents received 50 percent or more of recommended FLEX home visiting contact time showed improvement on academic achievement, reduced attention/concentration problems, and improvement in social skills and overall social competence. Compared to high-risk control participants, high-risk program participants made significant improvements in a number of areas, including:

- **Academic achievement:** High-risk children receiving the program showed significant improvement in rate of academic achievement with this effect primarily accounted for by gains in basic reading skills. This effect held true for boys and girls.
- **Self-regulation:** Both program and control children showed reductions in self-regulation problems. However, those program children with the highest level of aggressive behavior showed significant reductions in behavioral problems as compared to their high aggressive control counterparts.
- **Social competence:** High-risk children receiving the program made significant gains in social skills, social adaptability, and leadership following 3 years of intervention.

Parents of children with the highest level of aggressive behavior, who received 50 percent or more of recommended FLEX contact time, reported improved investment in their child and less personal distress.



involved African American children and their families living in economically disadvantaged urban communities. The program is specifically aimed at children who display early aggressive, disruptive, and/or nonconformist behaviors.

BENEFITS

- Positive self-image
- Self-regulation and constructive coping
- Healthy problem-solving and assertive communication skills
- Positive peer affiliations
- Positive attitudes toward learning
- Parental competence and capacity to support and nurture children's development

HOW IT WORKS

A family advocate is responsible for running Early Risers. This individual coordinates and provides services for the CORE (child-focused) and FLEX (parent/family-focused) components. The family advocate is responsible for delivering Early Risers' manualized program to children and their parents, year-round, at school and at home.

For the CORE component, the family advocate is responsible for:

- Regularly visiting the child's school
- Consultation with teachers
- Individual mentoring of the student
- Facilitating improved communication between home and school
- Teaching children the skills necessary to make and sustain friendships
- Providing recognition for children's efforts and accomplishments
- Administration and coordination of summer school program

In the role of FLEX home visitor, the family advocate:

- Schedules regular home visits
- Develops supportive relationships with parents
- Assesses family strengths and needs
- Assists in family goal-setting and strategic planning
- Brokers community services

Early Risers is best implemented in schools or local community centers. A Summer Program component is ideally delivered in community school settings, but also can be run in community centers, faith-based centers, or similar locations. The Summer Program also requires a larger staff.

IMPLEMENTATION ESSENTIALS

Staffing

Cost-effective operation of Early Risers requires one family advocate for every 25 to 30 child/family participants. A qualified family advocate must have a minimum of 2 years of field experience in human services and a bachelor's degree in social work or related field. A supervisor, responsible for staff recruitment, education, training, oversight, and evaluation, also is needed.

Program Training and Materials

A 5-day training program can be held at the host site for up to 20 family advocates and program supervisors. Further technical assistance via site visits or phone contact is recommended. Early Risers also offers a *Skills for Success Training Manual*, "Skills for Success" program video, and other program resources.

Timeline

- Startup activities will require 3 to 6 months. They include screening and recruiting children and their families, recruiting and training program family advocates, developing referral sources and relationships with community service providers, and obtaining school support.
- Program implementation starts with a 6-week **Summer Program** that runs 4 days per week. Program components include academic instruction, social skills training, cultural education, and creative arts and sports skills instruction.
- The **Check and Connect Program** begins shortly after the start of the school year and runs concurrently until the end of each school year for 2 to 3 years. Family advocates visit each child's classroom on a weekly basis to consult with teachers and provide one-on-one mentoring to the child when indicated.
- The **Family Program** also begins shortly after the start of the school year. Parent and child groups are assembled and meet for biweekly evening sessions (12 sessions in years 1 and 2 and 6 sessions in year 3). Sessions begin with a communal family dinner followed by concurrent parent and child groups that last approximately 90 minutes and conclude with a 30-minute parent-child interactive activity.
- **FLEX Family Support Program** begins approximately 3 months into the school year and runs continuously thereafter. The amount of FLEX contact time will vary for each family based on need. A minimum of six home visits per year is recommended.

PROGRAM BACKGROUND

Over a 10-year period, Early Risers evolved from a school-based intervention delivered by teachers and expert consultants to a community-based intervention delivered by community providers. Its home visitation delivery system provides for interventions and services that are tailored to each family's strengths, needs, and barriers to participation. Several variations of the program now exist, each contextualized to accommodate both urban and rural implementation.

EVALUATION DESIGN

The intervention was tested using a multiple time-series design involving a baseline assessment and three annual assessments thereafter. Children were screened for risk (i.e., aggressive behavior) during kindergarten and randomly assigned (nested within schools) to either the program or no-program (i.e., control) conditions. Eighty-two percent of the participants completed the 3-year prevention trial. Rate of attrition and characteristics of those who failed to complete the trial did not differ for program and control groups. Outcome variables were specified that corresponded to four global competence domains (i.e., academic competence, social competence, self-regulation, and parent investment), each of which included several specific skill domains.

PROGRAM DEVELOPERS

Gerald J. August, Ph.D.

George M. Realmuto, Ph.D.

Michael L. Bloomquist, Ph.D.

Early Risers "Skills for Success" was developed by Drs. Gerald J. August, George M. Realmuto, and Michael L. Bloomquist at the Center for Prevention and Children's Mental Health at the University of Minnesota. This group of prevention specialists is involved in the design and evaluation of community-based prevention programs that address serious conduct problems experienced by youth such as drug abuse, violence, and delinquency.

CONTACT INFORMATION

Gerald J. August, Ph.D.
Division of Child and Adolescent Psychiatry
University of Minnesota
F256/2B West
2450 Riverside Avenue
Minneapolis, MN 55454-1495
Phone: (612) 273-9711
Fax: (612) 273-9779
E-mail: augus001@tc.umn.edu

RECOGNITION

Model Program—Substance Abuse and Mental Health Services Administration, U.S.
Department of Health and Human Services