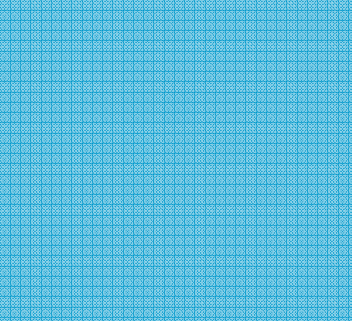


**EXECUTIVE SUMMARY:
AN EVALUATION OF THE EARLY MENTAL HEALTH
INITIATIVE'S PRIMARY INTERVENTION PROGRAM AND
ENHANCED PRIMARY INTERVENTION PROGRAM FOR THE
1995-96 ACADEMIC YEAR**



SUBMITTED TO THE:
STATE OF CALIFORNIA DEPARTMENT OF MENTAL HEALTH



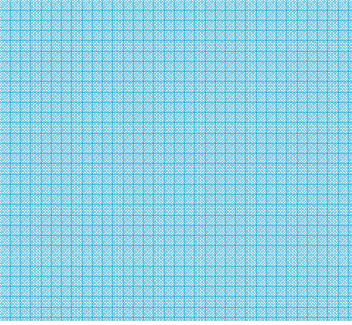
HUGH F. CREAN, PH.D.
BOHDAN S. LOTYCZEWSKI
SEPTEMBER, 1996



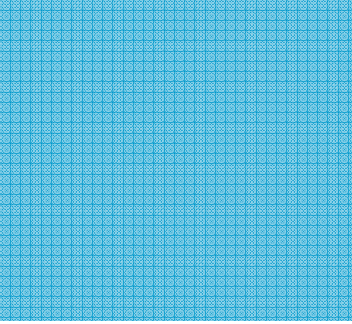
children's institute
Strengthening social and emotional health



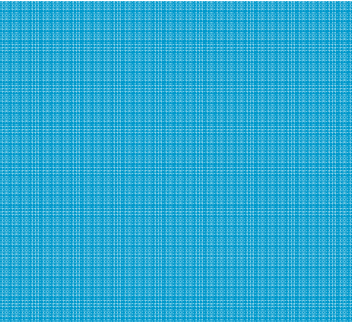
EXECUTIVE SUMMARY




The Primary Mental Health Project, Inc., in collaboration with the California Department of Mental Health and 175 California school districts, conducted an evaluation assessing the effectiveness of the Primary Intervention Program (PIP), the Enhanced Primary Intervention Program (Enhanced PIP), and other models funded through the State of California's Early Mental Health Initiative (EMHI). PIP is a school-based early intervention program for kindergarten through third grade students who are identified as being at risk for developing later school and social adjustment difficulties. Enhanced PIP models add to the traditional PIP model by integrating supplementary program components. While participating in either of the programs, students receive services from carefully selected and trained paraprofessionals who work under the close supervision of mental health professionals. Paraprofessionals work to foster healthy self-concepts and to enhance social skills in the children - skills necessary for improving social and school adjustment. Each program is provided through a cooperative effort between the school district and the local mental health agency.

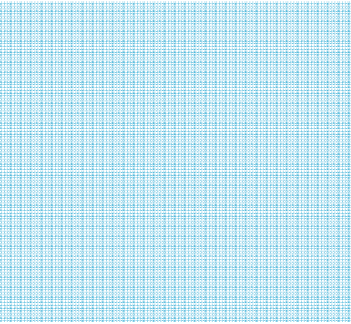


The impact of the traditional PIP and Enhanced PIP programs was evaluated for the 1995-96 school year utilizing data from 175 California school districts. Significant positive results were found using teacher and mental health professional rated indices of adjustment change for the children. Eighty-four percent of the 175 participating districts evidenced significant decreases in adjustment difficulties (e.g., acting-out, shy/anxious or withdrawn, and learning problems) as well as increases in adaptive competencies (e.g., frustration tolerance, peer social skills, assertive social skills, and task orientation). There were no significant differences in the amount of change witnessed in PIP versus Enhanced PIP students - the programs appear to be equally effective.



Data was received on over 24,000 children - approximately 22,100. were seen individually (averaging 11.4 individual contacts) and 990 children were seen in small group settings (for an average of 7.1 group contacts). The average length of contact was 31 minutes. Descriptive information regarding demographic and individual characteristics of the children support the early intervention focus of the programs and document the risk status of those children served. PIP and Enhanced PIP were found to be equally effective for boys and girls; for children from urban, suburban, and rural backgrounds; for children from a variety of parental constellations; and for children who had experienced





significant stressful life events.

Results from the 1995-96 evaluation continue to provide strong support for the efficacy of the PIP and Enhanced PIP programs. Teachers and mental health professionals clearly indicated significantly better school and social adjustment for children served. The results indicate that these EMHI programs, as currently implemented in California, are making a positive contribution to the school and social adjustment of students in grades kindergarten through grade three.



Note: Reference T96-431.1

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