



## Foundations for Success

*Improving early childhood mental health*

*to support successful families and communities in Ramsey County*

### Outcome Assessment results: Project KEEP February 2010

Foundations for Success was a five-year initiative designed to develop and implement a county-wide system for early childhood mental health services in Ramsey County. Funded by the John S. and James L. Knight Foundation and coordinated by the Community Action Partnership of Ramsey and Washington Counties, the initiative promoted culturally competent and family friendly services. Services were developed and implemented by a collaboration of more than 100 community agencies, representing local foundations, government, parents, school districts, health, mental health, early childhood professionals, and the University of Minnesota.

The initiative was evaluated by Wilder Research, including an annual analysis of outcome data collected through the project. Outcome data were collected for children participating in any of the funded programs using the *Strengths and Difficulties Questionnaire*. This final report summarizes all findings from the outcome evaluation of Project KEEP over the duration of the initiative.

#### Overview of completed SDQs

Strengths and Difficulties Questionnaires (SDQs) are completed for children at the beginning (intake) and end (discharge) of their time in Project KEEP. A total of 64 matched pretest/posttest SDQs were submitted to Wilder Research. The SDQs were completed between May 2005 and June 2009.

All of the questionnaires completed at intake were completed by teachers and done so in English. Questionnaires were completed for more males (67%) than females. At the time the intake SDQ was completed, children ranged in age from 3 to 5 years.

#### Results of the SDQ

The SDQ is comprised of five subscales: emotional symptoms, conduct problems, hyperactivity-inattention, peer problems, and prosocial behavior. In addition to subscale scores, a total difficulties score (sum of scores on all scales except prosocial behavior) was calculated for each child.

All scores can further be classified into one of three clinical categories: normal, borderline, or abnormal. An abnormal total difficulties score can be used to identify children who may have mental health concerns.

Changes in scores from intake to discharge are based on individually matched cases (n=64). The major SDQ findings are as follows:

- Overall, children showed statistically significant improvements in two domains of behavior assessed by the SDQ (prosocial behavior and hyperactivity), as well as an improvement in their total difficulties score.
- Between 13 percent and 31 percent of children demonstrated clinical improvements from intake to discharge (i.e., they improved from “abnormal” to “normal” or “borderline,” or from “borderline” to “normal”).
- The largest clinical improvements were on the prosocial behavior and hyperactivity scales, in which nearly one-third of children (30-31%) improved by at least one clinical category between intake and discharge.

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- Nearly one-third of the children also demonstrated improvement in their total difficulties scores, improving by at least one clinical category.
- Sixteen percent of children's total difficulties scores were "normal" at intake, compared to 30 percent at discharge.
- According to teacher reports, there was a significant decline in the extent to which difficulties interfered with children's classroom learning between intake and discharge.

### **Conclusions and recommendations**

- In general, the results of the outcome assessments suggest that children at Project KEEP are showing moderate improvements in their social-emotional behavior as a result of their participation in the program.
- In particular, children showed improvements their prosocial behavior, as well as a reduction in hyperactivity.

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### **For more information**

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