

**improving behaviour and
educational achievement
for children in school**

improving behaviour and educational achievement for children in school

Some researchers argue that emotional and behavioural difficulties contribute to poor educational engagement and academic achievement.

Others argue the opposite: that disengagement leads to emotional and behavioural problems.

Schools are interested in improving behaviour, emotions and academic achievement. This presentation offers one route toward that goal.

what are emotional and behavioural problems?

Emotional problems include anxiety and depression. Behavioural problems include antisocial behaviour, such as aggression and destructive defiance, and also lying and cheating.

Other related problems include hyperactivity and difficulty in forming and maintaining friendships with peers.

When children's problems are severe they may receive a formal diagnosis from a psychiatrist or clinical psychologist.

This is the most comprehensive form of assessment, but it takes time and resources are often stretched.

the alternative in schools

Researchers have developed numerous questionnaires to assess the presence of emotional and behavioural problems in children. In some cases their reliability (do they perform consistently?) and validity (do they measure what they're intended to measure?) have been thoroughly tested.

Although not as not as comprehensive as a formal assessment, well-tested questionnaires are reasonably accurate and have the advantage of permitting large-scale assessments of children's well-being.

the strengths and difficulties questionnaire

Dartington Social Research Unit has been using a measure called the **strengths and difficulties questionnaire (SDQ)** to improve the well-being of children on schools.

The **SDQ** was developed at the Institute of Psychiatry in London by Robert Goodman and is based on earlier work by Michael Rutter and colleagues.

It includes just 25 short questions and it takes children, parents or teachers and/or teachers about five minutes to complete online.

the strengths and difficulties questionnaire

The **SDQ** indicates well-being across five dimensions:

- emotional problems
- behavioural problems
- hyperactivity
- peer problems
- prosocial behaviour

Scores can be aggregated to produce a **total difficulties** score.

the strengths and difficulties questionnaire

Symptoms alone do not paint the whole picture. Impairment to development includes substantial distress or social impairment.

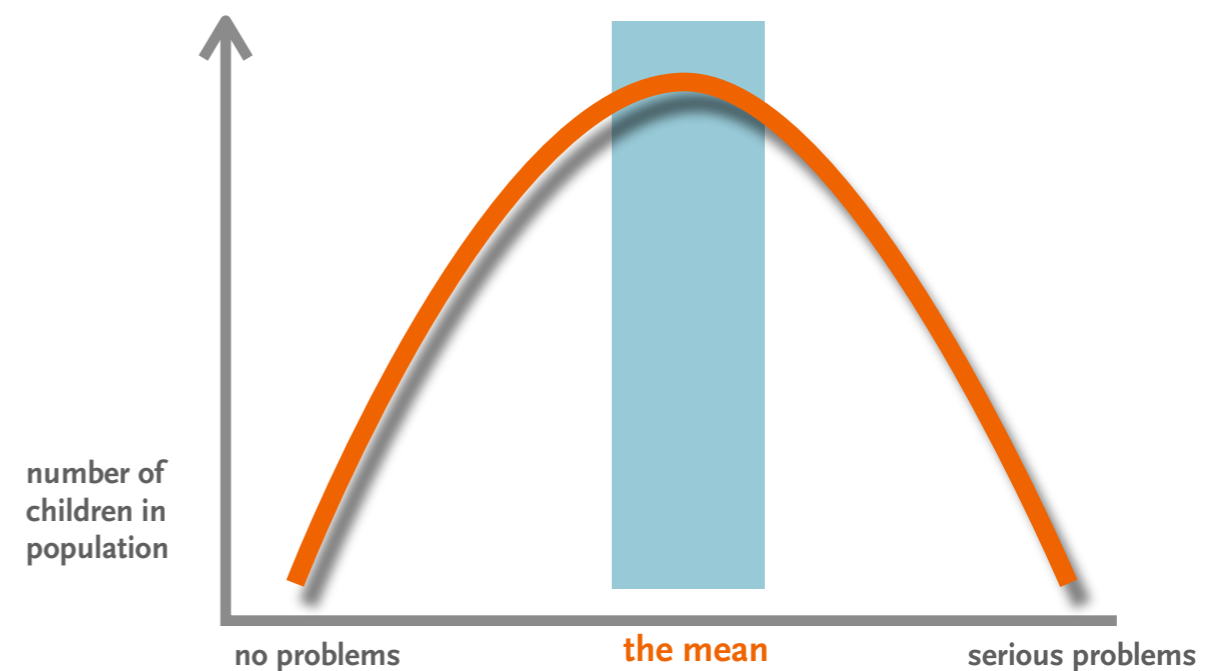
In addition to the presence of difficulty, an 'impact supplement' assesses how these problems may be affecting the children's lives and the lives of those around them.

two ways of using the SDQ

looking at the mean

Dartington has been using the SDQ in classrooms in two ways. In the first, SDQ data show how well typical children are doing with respect to behaviour, emotions, peer problems and hyperactivity.

This is often referred to as the mean score or average for the classroom or school.

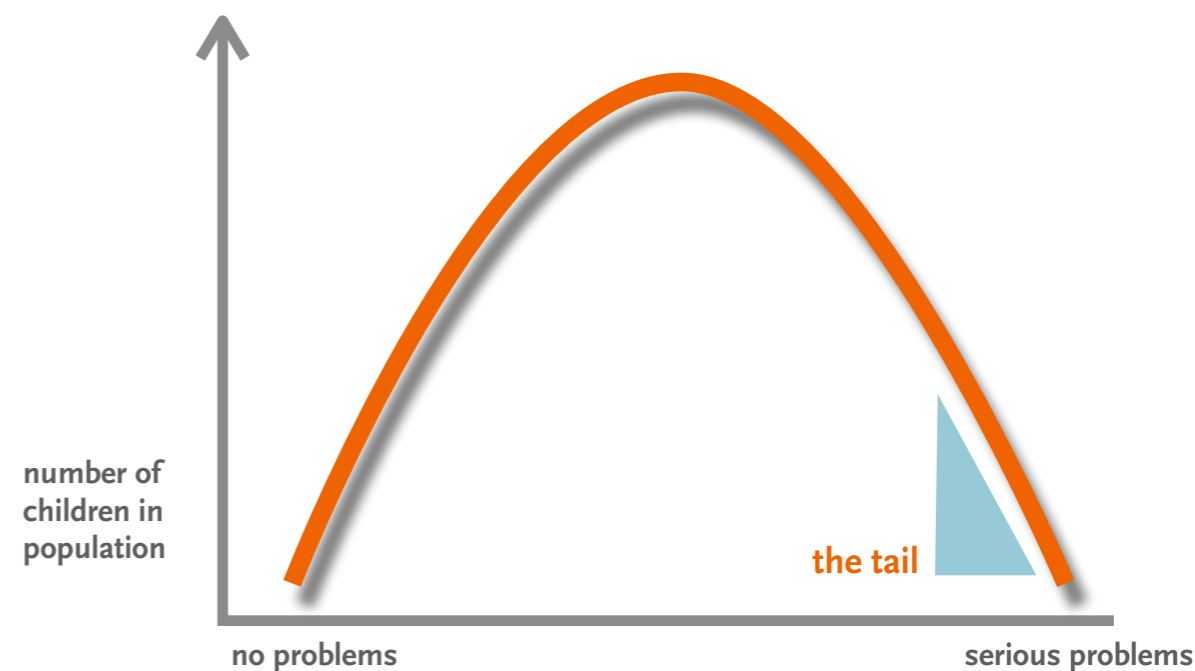


two ways of using the SDQ

looking at the tail

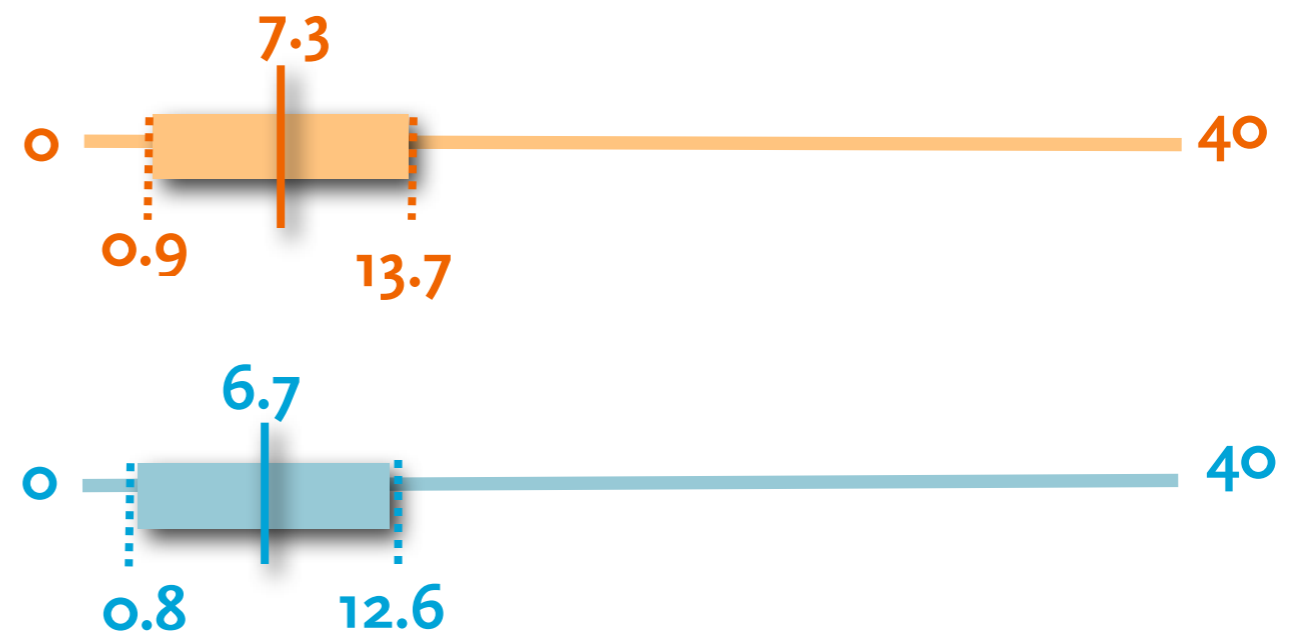
In the second method, **SDQ** data are used to indicate the proportion of children whose difficulties are likely to meet a clinical diagnosis of a mental disorder, such as depression, ADHD or conduct disorder. This indicates how many children in the classroom or school are in the **tail** of the distribution.

Mean and **tail** data can be compared with those from similar schools or other classrooms to indicate the extent of any deficit in ordinary behaviour and emotions.



how we analyse the data 1

Analysis can compare the mental health of the average child in a classroom or school (the **mean**) with **national norms**. This reckoning focuses on the overall mental health of all children, not just on those children with significant problems.

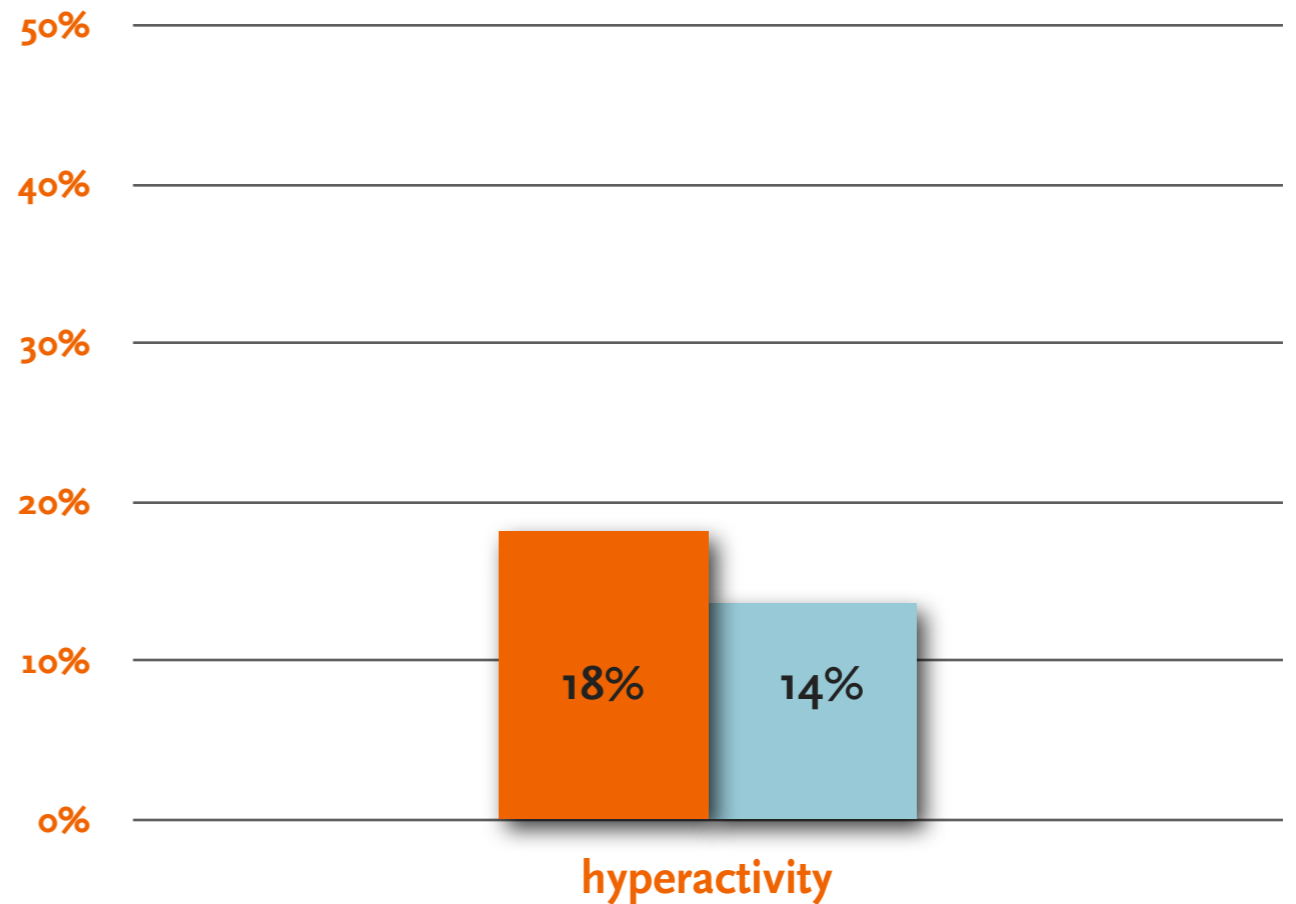


overall well-being: total difficulties

n = 1,203
years one to six
UK national norm

how we analyse the data 2

Data about the proportion of children in a classroom or school suffering from a clinical disorder such as ADHD can be compared with national norms.



mental health: ADHD

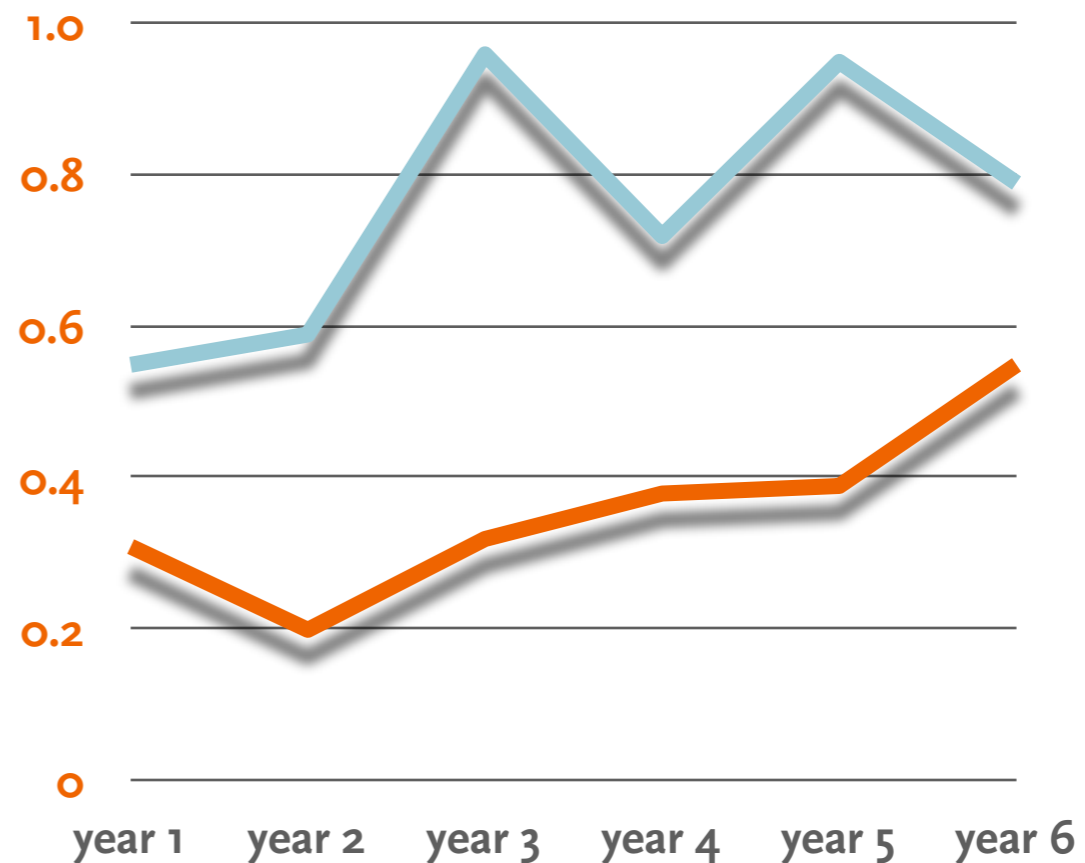
n = 1,203
years one to six
UK national norm

SDQ



how we analyse the data 3

Analysis can map the pattern of emotional and behavioural problems across the school years, indicating when problems peak or trough. These results will often confound teachers' predictions of where they think the problems lie.



impact of problems

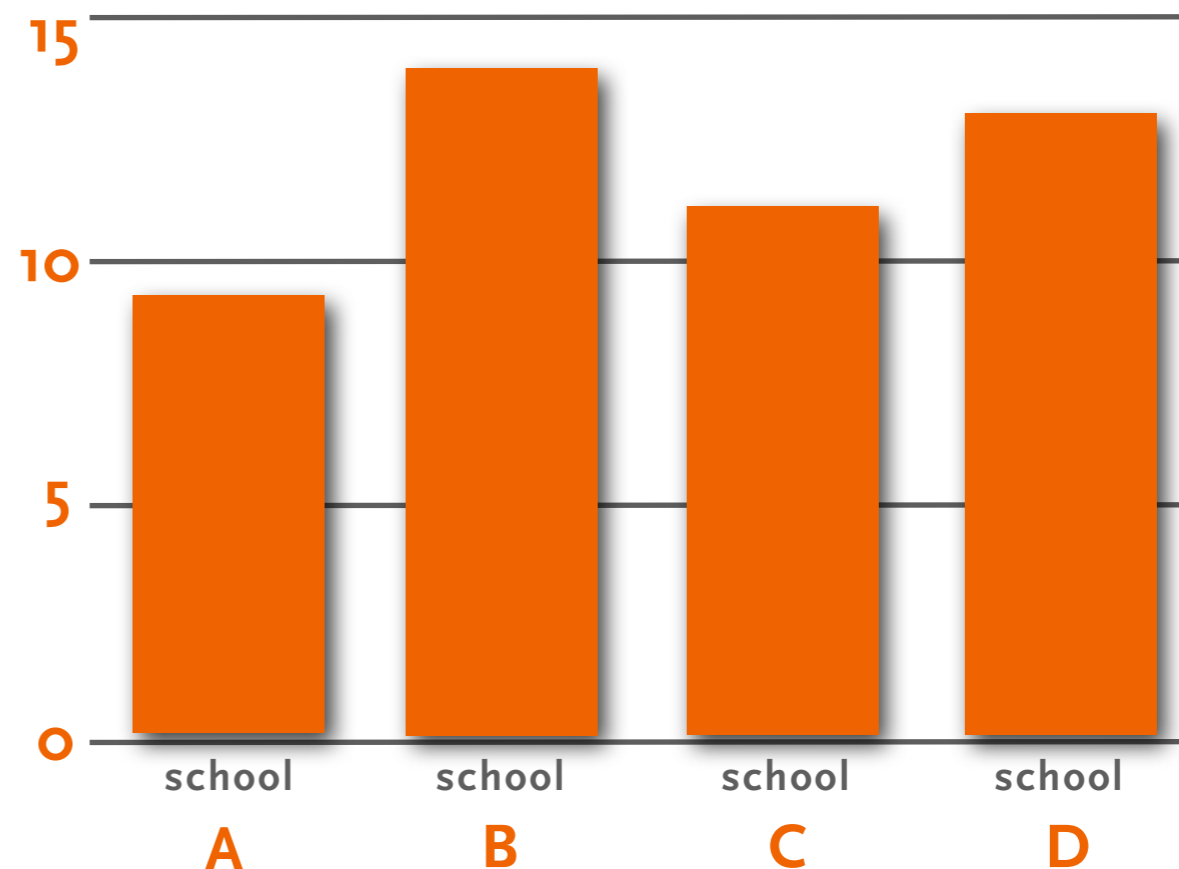
n = 1,203
years one to six
UK national norm

SDQ



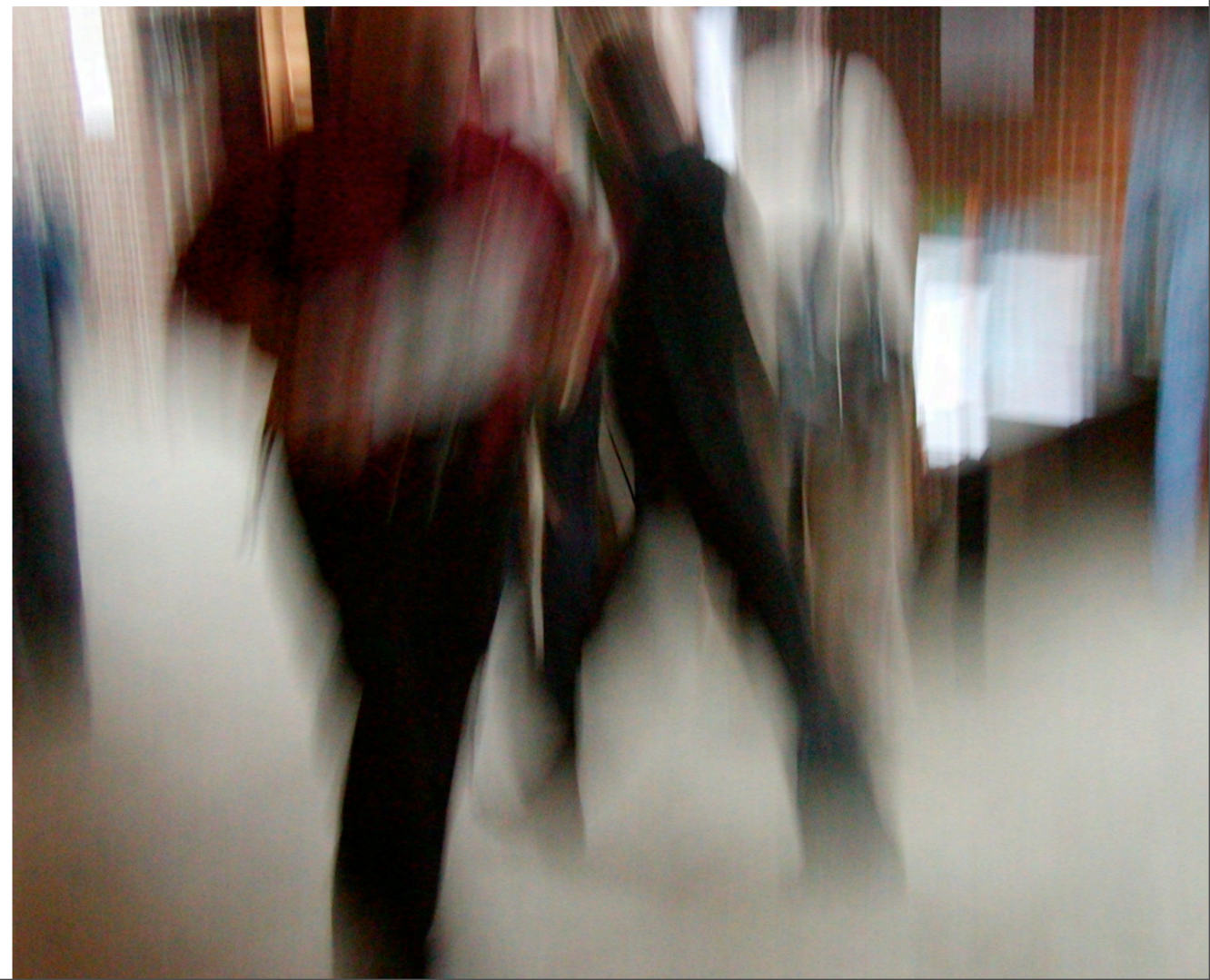
how we analyse the data 4

The data can be used to indicate levels of impairment to developmental and psychiatric disorders between schools or between classrooms in a school. This information can help to redirect resources to where they can have greatest impact.



how we analyse the data 5

Schools and local authorities are encouraged to implement the **SDQ** year-on-year to provide them with strong trend data over time. From this stream of information the mental health of children passing through school can be mapped (creating a moving picture), as opposed to the still picture suggested by cross-sectional sweeps.



service design



These data can be used by schools to design more effective ways of enhancing children's behaviour and emotional health as a means to improving their educational achievement.

Dartington common language methods that combine expertise in schools with the best prevention science can support the service design process.

The data can also be used to inform public-health prevention approaches that enhance the mental health of all children in schools (the **mean**). Such efforts may, for example, aim to improve to the national norm the behaviour of the average child in a particular local authority.

service design



The same range of data can be used to focus on identified areas of concern. This approach may include designing services to combat high levels of hyperactivity in particular classrooms, for example.

Examining the data may encourage a shift in thinking about allocation of resources to where they are most needed. This may be at the local authority level or within individual schools. For example, the data may show that disproportionate amounts of resource are being invested to address the needs of adolescents when investment during transitions into and between school may reduce the incidence of later problems.

PREVENTION ACTION

NEWS | COMMENT | RESEARCH | WHAT WORKS | PEOPLE | REVIEWS | BLOGS & FEEDS | EVENTS | REFERENCE | ABOUT

COMMENT | PRINT | EMAIL

SIMILAR LINKS

- Care leavers still missing out on good research
- SRCDD Day 3: Experiments Rule



Jyn Meyer, Beaverton

Skills beget skills: Nobel Laureate updates view on early intervention

1 May 2007

Nobel-prize winning economist James Heckman has long advocated the view that early investment in children yields the biggest returns. But in a recent commentary on new research findings he revises what has become conventional wisdom: "I now believe that early interventions with children are not so productive if they are not followed up with ongoing investments in children during their elementary and secondary school years." (see "Beyond Pre-K: Rethinking the conventional wisdom on educational intervention," [Education Week](#), March 19, 2007)

Heckman's research with his University of Chicago collaborator Flavio Cunha examines the value of continuing support for children beyond the early years into primary and post primary education. He summarizes the message in a single line: "we need to invest in early in children and not stop."

Heckman has long been a champion of early years programmes such as Perry Preschool, Abecedarian and the Chicago Child Parent Center Program. Using economic analysis alongside existing evidence from experimental trials he shows how government investment in pre-school programmes can reduce welfare dependency and crime in adulthood. At the heart of the argument are the economic costs of not intervening.

He cites a striking example of where early investment makes a an enormous impact on a particular group of children -- boys born to poorly educated white mothers. Heckman and Cunha found that without skill-building investments only about two in five boys in this group graduate from high school and over forty percent would be convicted of crimes. With the addition of a quality preschool program, there were notable improvements. But it was the combination of early intervention plus sustained investment into adolescence that made a dramatic and -- to the researchers surprising -- difference. When

sustained investment through childhood is made for boys with the same risk



UPCOMING EVENTS

FIRST BIENNIAL CONFERENCE OF THE INTERNATIONAL FAMILY AGGRESSION SOCIETY

18 Mar 2008 - 19 Mar 2008
University of Central Lancashire, Preston, UK

RECOMMENDED LINKS

- Professor James Heckman at the University of Chicago
- Education Week

EDITOR'S PICKS

RESEARCH : YOU DON'T HAVE TO BE UN-AMERICAN TO BE MORE HEALTHY

Research into childhood asthma among families arriving in the US from Latin America casts doubts on the 'Hispanic Paradox' - that less American means more healthy.

PREVENTION NEWS : COMMUNITIES THAT CARE UNDER US SPOTLIGHT

Evidence about the longer-term performance of the latest generation of community-driven public health interventions is beginning to emerge from a University of Washington research comparison.

WHAT WORKS : HEALTHY STEPS MAY NOT BE THAT MUCH HEALTHIER

A US early childhood support program that aims to provide new 'baby owners' with the equivalent of the missing manual in the form of expert advice has emerged from a Chicago evaluation showing only modest gains.

Dartington **service design** methods draw on high quality research and practice from around the world. Databases of proven models are routinely consulted and will sometimes provide the basis for a strategy that can be implemented directly.

Engagement with the data and with service design methods in turn necessitate strong evaluative strategies from the outset. **SDQ** data may inform the design of new services as well as helping to evaluate their impact.

capacity building and evaluation



We encourage schools and local authorities to collect data year-on-year so that they can monitor trends in the mental health of children.

The data can also contribute to the evaluation of newly-developed services and initiatives intended to improve children's outcomes.

For further information about the SDQ
go to www.sdqinfo.com

For further information about our approach
contact Tim Hobbs at the Dartington Social
Research Unit:

t +44 (0)1803 763416

e thobbs@dartington.org.uk