Outcome Evaluation of
The Fast Track Program

for

Hull Child and Family Services

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EXECUTIVE SUMMARY

The Fast Track Program was developed as an early intervention program for at-risk, school-aged children with the aim of preventing the development of serious behavioural issues associated with conduct and anti-social problems. The intervention is based upon significant research from the United States using a multi-faceted approach in the school, at home, and in educational groups. Implemented in Calgary, this Fast-Track Pilot Project was a long-term intervention program following children at the beginning of the first grade and continued for five and six years. Education Facilitators helped to implement a classroom-wide cognitive and social-development curriculum (PATHS), and also provided classroom support, facilitated skill practice groups for the target children and oversee a tutoring program. Family Facilitators provided in-home support. The Family Facilitators also provided parenting groups and helped to create a better relationship between the home and the school.

Using multiple standardized measurements, comparisons of assessments were conducted at pre-intervention and post-intervention time points. Multiple measures, provided by multiple informants as well as item analyses, indicated positive client change with respect to decreases in behavioural problems, general academic issues, peer difficulties and parenting difficulties. Reports also incorporated qualitative measures to gather feedback from parents and teachers who had the most involvement in the Program as well as feedback from partners in collaborating schools. Three types of qualitative measures were used to collect data: Parent Satisfaction Questionnaire, Partners Questionnaire and Teacher Focus Groups. Results were analyzed using thematic analysis. A list of key findings demonstrates the proven success of the Program:

Key Findings:

- 81.8% of clients’ Total Issue Severity Scores decreased;
- 76.5% of clients’ Behavioural Problem Scores decreased.
- 87.5% of clients’ General Academic Issue Scores decreased.
- 61.5% of clients’ Relationships and Peer Issue Scores decreased.
- 66.7% of clients’ Family Parenting Issue Scores decreased.
- Over 68.0% of children improved their social skills.
- The children’s strengths, self-esteem and willingness to learn increased.
- The majority of partners found the collaboration effective and the support from staff outstanding.

In summary, Hull has achieved the key goal for the Fast Track project - to prevent the escalation of early behavioural difficulties related to conduct and anti-social behaviours. Evidence indicates that positive social-skill development was enhanced with
simultaneous reductions of behavioural problems and issues. **This outcome is consistent with published research on the Fast Track model.**

Limitations to the evaluation included a small sample size and the lack of a control or comparison group, which limited the number and types of analyses that could occur. The absence of a comparison group made it difficult to determine if client changes were greater than similar groups in these communities without the Fast Track interventions. If the Fast Track model were extended over a longitudinal period, it would be possible to address these issues in future evaluations.
INTRODUCTION

This report was compiled at the request of the Fast Track Program. The report intends to describe the types of outcomes achieved to date by Fast Track Calgary. The first section gives a brief description of the Fast Track Program. This is followed by the methods used to collect data and conduct analyses. The findings from the evaluation used data from clients discharged from Fast Track between September 1999 and August 2005. A summary and commentary of the data is then presented. The data is presented in a number of sections and each data set is presented with a short summary of the results. A discussion is provided at the end of the report.

Background

Fast Track was a program originally developed in the United States to prevent the development of serious antisocial behaviours in at-risk school-age children (Conduct Problems Prevention Research Group, in press). This project model was selected due to initial results obtained in the evaluation of the Fast Track Program in the United States. Analyses to date has indicated that the intervention had significant impacts on the multiple issues that were assessed during elementary school, such as improvements in children’s behaviour and social skills, and parenting strategies. The effects appear to have been strongest following the early intensive intervention efforts in first grade (Conduct Problems Prevention Research Group, 1999a, 1999b) and to have been maintained with continued intervention throughout the elementary school period (Conduct Problems Prevention Research Group, 2002a, 2004). Previous analyses of program outcomes support the concept that a multifaceted intervention may be necessary to improve high-risk children’s adjustment outcomes (Conduct Problems Prevention Research Group, 2002b). The effects of the Fast Track intervention during elementary school appear to have been comparable for boys and girls of various cultural backgrounds in both urban and rural settings (Conduct Problems Prevention Research Group, in press). Based on reports of Fast Track results, in September 1999, Hull Child and Family Services in Calgary replicated the project in collaboration with the Calgary Board of Education and the original Fast Track program developers.

Project Intervention

The key goal of the pilot project was to disseminate the model to Calgary while achieving positive outcomes for children and families, especially to prevent the development of serious anti-social behaviours in children. Some resource limitations in dissemination were observed in comparison to the original project, including limited funding for project supports, such as the replication of the original research methodology. However, the project curriculum was not changed. This standardized curriculum is designed to improve social participation, pro-social cooperative behaviour, communication skills, self-control, interpersonal relationships and social-problem solving skills. The project curriculum was taught in school and in the home beginning in the first grade and was continued for five to six years.
The Fast Track project in Calgary is an early-intervention program focused on preventing the development of serious conduct problems in at-risk, school-aged children using an integrated model. Education Facilitators provide classroom support, oversee a tutoring program for these children and help to implement a classroom-wide cognitive and social-development curriculum that is administrated by the teachers (PATHS, Promoting Alternative Thinking Strategies, Greenberg & Kushe, 2002). Family Facilitators provide in-home support, parenting skills practice and help to facilitate a better relationship between the home and the school. Parent and children's groups are offered as additional support and teaching. This method is intended to enhance multiple areas of child development including, emotional understanding, self-control, personal relationships with peers, family and teachers and academic achievement.

**Target Communities**

The project targeted communities in Greater Forest Lawn that have a higher number of potential risk factors (such as poverty, high transience, and higher school dropout). Valley View Elementary and Patrick Airlie Elementary were selected to participate from the schools within the Calgary Board of Education (CBE). The schools in CBE Area 3 tend to have a higher number of students with identified learning challenges, than the rest of the city.

**METHOD**

The key goal of the project was to disseminate the Fast Track model to Calgary while achieving positive outcomes for children and families, especially to prevent the development of serious anti-social behaviours that lead to conduct problems. Funding restrictions limited the size of the project; hence, it limited the sample for this report and the capacity of the project to replicate fully the research methods. Therefore, a pre- to post- intervention model is reported without interim time series aggregation and a control group comparison is not used in these analyses. Analyses using a battery of instruments, including item analyses, were conducted to answer key questions about the project. Findings generated by these instruments were supplemented by qualitative comments from a Parent Satisfaction Questionnaire, Partners (Inter-Agency Collaborators) Questionnaire and Teacher Focus Groups.

**Participants**

Participants served in the program included 32 students, 21 males and 11 females, with a mean age of 6.2 years at admission to the project. These clients were mostly described as English Canadian with the exception of 15% who were First Nations in origin and 16% who were from other minority backgrounds. All clients spoke English. Their mean duration in the Fast Track program was 3.6 years. The first cohort group of students participated in the program from grade one to grade six and began intervention in 1999. The second cohort group participated in the program from grade one to grade five and started intervention in 2000. In this report, due to the small sample size, all 32 students that completed standardized instruments with pre-to-post data were included in the analyses. See appendix C for details of the recruitment process.
Measures and Evaluation Design

The Fast Track Program assessment consisted of 11 standardized instruments completed with each client that entered the program. This evaluation battery included reports from parents, teachers and Fast Track staff. These include the Behaviour and Assessment Scale for Children (BASC) Parent Rating Scale and Teacher Rating Scale, HOMES Issue Severity Scale, Post-Intervention Ratings, Social Health Profile, Social Competence Scale – Teacher, Parent and Teacher Involvement Measure – Teacher, Parent and Teacher Involvement Questionnaire - Parent, Teacher Post Ratings, Parent Questionnaire, and Being a Parent. A summary of each instrument is listed in Appendix A. Results from these instruments were examined for this report and only key findings are described in the report.

The battery of instruments were administered at the start of the intervention (pre), at each school year while in the program, and at the end of the Fast Track intervention (post). Together they measured multiple aspects of social development, behaviour and cognitive skills and concepts. Some instruments overlapped with respect to the concepts measured to help ensure reliable results. Because the program did not have the resources for ongoing program evaluation, complete monitoring with all instruments for all participants did not occur. The highest completion rate occurred with the HOMES Issue Severity Scale, an on-line instrument that uses an integrated outcome and service delivery data-monitoring model.

The qualitative comments were collected from the Parent Satisfaction Questionnaire, the Partners Questionnaire and the Teacher Focus Groups. These questionnaires were administered at the end of the Fast Track Program (post). The Parent Satisfaction Questionnaire contained both quantitative and qualitative measures. It was designed to capture parents’ feedback with respect to the behaviour and social development of the children. It was also created to capture the parents’ new skill sets and knowledge that they developed in the Parent Groups and from the Fast Track Program.

The participants from the Partner Questionnaires were school principals. They were given an open-ended questionnaire and were asked to give feedback on the partnerships and effectiveness of the program. The third medium of collecting qualitative comments was through the Teacher Focus Groups. Using conventional sampling methods, the teachers who were most involved in the Program were invited to share their observations and suggestions around the program.

Questions and Analyses Description

In order to investigate the key goal of preventing serious anti-social behaviours related to conduct problems, the overall outcome was assessed in five focus areas: externalizing behaviour problems, social-skill development, peer relations, parent-child relations, and academics. Pre-to-post descriptive analyses were conducted to determine the degree of change that occurred both overall and within each focus area. Descriptive analyses of subscales and test items were conducted.
RESULTS

Program outcomes were determined by conducting a broad analysis of outcomes followed by analyses within five focus areas. Given the large number of variables in this data set, only a subset of instrument subscales is reported in each result area. Descriptive statistics are used to describe results. Item analyses from various instruments are described to give specific examples.

1) Results Based on Standardized Instruments

1.1 Overall Outcomes

HOMES Total Issue Severity Scale, Total Scores were assessed at the start of the intervention (pre) and again at the end of intervention (post). The HOMES (Ernst, 2000; Ernst, 2004) is a program-evaluation software package used by human-service agencies to track a wide variety of evaluation information. A critical feature of the system is its ability to monitor pre-to-post outcome evidence toward achieving standard outcome statements. These are based upon the Likert rating of reasons for service presented by children within Fast Track. Comparisons of scores at the start and at the end of the intervention give an indication of outcomes and the percentage of children whose ratings increase or decrease can also be calculated. Decreased ratings indicate positive outcomes. In the Fast Track Program, 81.8% of the clients’ Total Issue Severity Scores decreased; overall, the mean program score decreased from a pre score of 17.57 to a post score of 11.90.

![Percent of Clients with a Change in Scores from Pre to Post Intervention](chart1.png)

**Chart 1**: HOMES Pre to Post Issue Severity Scale, Total Scores

The HOMES scores indicate the greatest need for the client group with respect to behavioural problems, general academic issues, as well as relationship and peer issues. Client change in these areas included decreased Behavioural Problem Scores for 76.5% of the client group; decreased General Academic Issue Scores for 87.5% of the client group; and decreased Relationships and Peer Issue Scores for 61.5% of the client group. Additional change was noted with the Family Parenting Issue Scores, decreased scores occurred for 66.7% of the client group. Other HOMES subscales did not indicate a high frequency of client issues or need and thus change scores are not reported.
Chart 2. Key Impact Areas

Charts of all examples relating to the section below can be examined in Appendix B.

**Data Reliability and Trustworthiness**

One component of the HOMES outcome monitoring system is a score related to the reliability or trustworthiness of the data, the Data Impression Score. As this score approaches 1.0, the data becomes statistically unreliable and less likely to be valid; scores well below this and closer to zero (0) have greater trustworthiness. In the case of the Fast Track data set, the highest data impression score for the HOMES Issue Severity Scale was .219 for the overall pre-score. This score is well below the threshold for statistical skewness and indicated a reliable and trustworthy data set.

1.2 Externalizing Behaviour Problems

One measure of externalizing behaviour problems is the HOMES Behavioural Problem Subscale. This score decreased for 76.5% of the clients. The mean score reduced from a pre-score of 7.17 to a post-score of 5.35. This effect was replicated with the BASC – Parent Rating Scale Subscale Scores. For example, the Hyperactivity Subscale score reduced from a mean pre-score of 13.95 to a mean post-score of 9.55.

Using item analysis to examine the changes in Externalizing Behaviours Problems, for instance, “throwing tantrums,” 34.21% of parents responded that their children threw tantrums “often/almost always” before entering the Fast Track Program. After the intervention, 45% reported that their children “never” threw tantrums. Other items indicated similar changes, such as “hitting other children” and “getting into trouble in the neighbourhood.”

1.3 Social Skill Development

Social-skills development was measured with a number of scales and instrument items, measured by teachers, parents and Fast Track staff. Change was noted using the BASC – Parent Rating scale, which was completed by parents that the Social Skills Subscale score increased from a mean pre-score of 22.90 to a mean post-score of 25.50 and indicated that over 68% of children improved their social skills. An item analysis indicated examples of change including improvements in the BASC – Parent Rating Scale for areas
of solving problems. Before the Fast Track Program, only 18.92% of children would “often or almost always give good suggestions for problem solving” and 35.14% were “often or almost always being a good sport.” After the intervention, the scores increased positively to 60% for both items. Results from the item in the Teacher Post Ratings, “ability to stop and calm down when excited or upset,” also showed 88.9% of “little/somewhat improved or much improved” in this skill set. This result is consistent with target skills taught in PATHS curriculum.

1.4 Peer Relations
Peer relations were measured with a number of items reported by parents, teachers and the Fast Track staff. The Relationships and Peer Issue Subscale Scores of HOMES, measured by the Fast Track staff, indicated a positive outcome with a decrease of 61.5% of the client group with an additional 30% of the clients indicating low pre-intervention scores that did not change. Overall, the mean score reduced from a pre-score of 3.77 to a post-score of 2.69.

Item analyses in some instruments indicated changes in a number of areas. For instance, in terms of offering help to other children in BASC – Parent Rating Scale, parents reported 66.8% of children “often or almost always” offered to help others, as compared to 42.32% prior to the Fast Track interventions.

Other examples are mentioned in Appendix B, such as similar change of BASC – Parent Rating Scale items: “complains about not having friends” and “has friends who are in trouble.”

1.5 Parent-Child Relations
Parent-child relations were measured with multiple measures. The Parenting Self-Efficacy Subscale of the Being a Parent instrument increased for 64.7% of the parents. The mean score increased from a pre-score of 0.61 to a post-score of 4.06. With respect to item analyses, using the Being a Parent measure, the pre-score of 58.97% increased to a post-score of 66.42% in terms of statement, “you honestly believe you have all the skills to be a good parent.” As well, the instrument Post-Intervention Ratings of Child and Parent Change, completed by parents, also indicated changes in parent-child relationships with a total rating of 60% responding “improved” relationships when asked, “How well you and your child get along with each other.”

1.6 Academic Issues
Academic issues were also measured using multiple tools and informants. The Academic Issue Subscale Scores in HOMES that was completed by teachers and Fast Track staff decreased for 88.2% of the client group. The mean score reduced from a pre-score of 5.52 to a post-score of 4.23. Items within the Post-Intervention Rating, measured by teachers were consistent with this result, including ratings of the child’s ability to read with 80% saying reading ability improved. The Social Competence Scales indicated improvement in the child’s ability to follow the teacher’s verbal instructions.
2) Results Based on the Parent Satisfaction Questionnaire

This questionnaire contains both quantitative and qualitative questions. Parents whose children were in the Fast Track Program from 1999 to 2006 were surveyed annually. A total of 91 surveys were completed and analyzed. As the survey was distributed at different points of time during the Program, the quantitative results were aggregated and averaged. For the qualitative comments, a “thematic analysis” method was initially used to sort the comments, thereafter; the themes were ranked from most to least common. Thematic analysis is commonly used in qualitative research and evaluation. It is a systematic process of categorizing the content of text and identifying relationships among the categories (Berg, 1995; Lane, Koka & Pathak, 2002). Thematic analysis focuses on specific themes and patterns (Aronson, 1994).

2.1 Quantitative Results

• Helpfulness of the Parent Group: Using the Likert scale, parents were asked to rate the helpfulness of the parent group. The survey results indicated 93.40% of parents thought the Parent Group was “very helpful or somewhat helpful.” 91.21% felt that the learning in the Parent Group was “very helpful or somewhat helpful” in terms of helping their child adjust in school. As well, 90.26% of parents reported that the Parent Group was “very helpful or somewhat helpful” in terms of helping their child behave better at home.

Furthermore, 92.14% of parents agreed that it was “very helpful or somewhat helpful” to talk with other parents in the Parent Group on a regular basis. 91.11% of parents thought that the Parent-Child sharing time was “very helpful or somewhat helpful.”

• Effectiveness of the Family Facilitator: Parents were asked to rate the helpfulness of their Family Facilitator with three different items: a) talk with parents about their child’s adjustment in school during the home visit b) the Family Facilitator’s availability for parents and c) if the Family Facilitator helped the family reach their goals or work on other problems, if any.

Based on the survey results, it is evident that the Family Facilitator played a noteworthy role in supporting the parents and their children. The survey results revealed that 97.80% of parents found it “very helpful or somewhat helpful” to talk to the Family Facilitator about their child’s adjustment in school. Furthermore, 94.51% of parents reported that it was “very helpful or somewhat helpful” to have the Family Facilitator available when needed. The majority of parents (96.71%) rated the Family Facilitator as “very helpful or somewhat helpful.”

Additionally, one item from this survey explored the helpfulness of the Education Facilitator. The results indicate that 68.54% of parents found it “very helpful or somewhat helpful” to talk to the Education Facilitator about their child’s adjustment in school.
• **The Support of Tutors:** Parents were asked to report if they had a tutor work with their child. Of the 54 responses, 28 (51.85%) of parents had a tutor for their child. Of these parents, 67.82% found the tutor “very helpful or somewhat helpful” in terms of assisting their child learn to read. In addition, 68.24% of parents indicated it was “very helpful or somewhat helpful” for the tutor to spend time with child.

• **Groups and Programs:** A vast number of parents (98.88%) agreed that the children’s group was “very helpful or somewhat helpful.” As well, 80.46% of parents thought that the PATHS lessons in the classroom were “very helpful or somewhat helpful” for their child. Overall, 82.22% of parents stated the Fast Track Program was “very helpful” to their child and family. The survey further sought feedback from parents with more than one child in the Fast Track Program. Of these parents, 93.45% indicated that the Fast Track Program was “very helpful or somewhat helpful” to all their children.

### 2.2 Qualitative Results

**a) Fast Track Group Meetings**

Along with quantitative questions, parents were asked to reflect on their experiences in the Parent Group meetings. In particular, parents were invited to comment on the benefits of the meetings as well as those areas that could be improved upon.

*Benefits*

• **Support and Interaction among Parents:** The majority of parents spoke of the support they received during the group meetings from other parents in similar situations. They were glad to learn that they were not alone in their struggles and were happy to lend support to those parents who needed extra help. They further learned about new methods of solving problems. Parents enjoyed the discussion time as it was not only informative, but also allowed them to discuss their issues and feel a sense of community. Parents were able to take the support to the next level and connect with each other outside the group meetings.

• **New Knowledge and Methods:** The parents stated that the knowledge and methods they learned from the Facilitators and other parents during the group meetings helped them to handle difficult situations. It further gave them an opportunity to practice the new methods in the group. Parents agreed that the information they gained was useful when conflicts arose.

• **More Quality Time with Children:** The parents enjoyed the one-on-one time with their children. They mentioned that they attended these group meetings because they could spend quality time with their child. They believed this interaction helped to strengthen their child’s confidence and improved the parent-child relationship.
Other themes included: better peer relations, helpful and knowledgeable staff; educational group activities, and encouragement to attend structured group meetings.

**Suggestions**

- **Logistics of the Meetings:** The parents reported that the group meetings needed to be more frequent in terms of scheduling. They also suggested more flexible meeting times, saying they found weeknights and Saturday meetings difficult to attend. Many parents reported that they needed to run errands and still try to attend the meetings. That said, they were grateful that food or snacks were served as it energized them during the meetings.

- **Need New Materials and Contents:** The parents did not like that some materials were repeated every year. They also stated that at times the discussions were too repetitive, especially when the Facilitator had to repeat information to new parents or parents who missed sessions. Recapped information slowed down the discussion considerably. As well, specific themes were not relevant to all parents, as parents progress at different rates.

- **Create Motivation for Attendance:** Reasons for not wanting to participate in the group meetings included: some parents gave unwanted advice to other parents, which was perceived as patronizing; children’s behaviour sometimes became worse in the meetings; group activities, such as role playing, were not sufficiently encouraged for parents to participate.

**b) Fast Track Program**

The parents were also invited to express what elements they liked the most about the Fast Track Program and what they liked the least. The qualitative comments support the quantitative results.

**Helpful Strategies**

- **Parent Groups Meetings:** The parents were pleased to meet other parents who understood the depth of challenges they faced. This allowed them to make connections with other parents and develop supportive networks. Additionally, the group discussions were informative and useful – offering an opportunity for parents to de-stress and recuperate. The open and warm atmosphere allowed parents to talk about issues, share common goals, and look at problems in different ways. Because of these meetings, the parents stated they felt greater confidence just knowing there were supports out there. Parents further reported that the Fast Track staff members were “amazing” and that they felt “blessed” with the support they received. They also said they were pleased to reach their goals throughout the Program. The meetings also provided quality time for parents and their children to spend the evening together.

- **Home Visit and Tutoring:** During the home visits, the parents were able to deal with their unique issues privately and specifically. The visits gave parents a chance to be honest and focus on their needs. The one-on-one time with Family
Facilitators further helped parents acquire the skills to handle stressful situations more practically. Children reportedly liked their tutoring sessions. The tutoring also helped the children to read better and perform better academically. The Family Facilitators further helped the children to deal with their emotions better during home visits.

- **New Methods**: The parents learned to praise their children more often, take deep breaths when running into problems with children and communicate more openly with children on various topics. In turn, the children were able to brainstorm more easily and stay focused for longer periods. They were also able to discuss their feelings more calmly with their parents.

- **Genuine Support from the Facilitators**: The parents said the Facilitators showed genuine interest in their children’s overall well-being. The Facilitators gained the children’s trust by being caring. They were always resourceful and respectful. Overall, the parents were pleased with the support they received from the Facilitators.

- **Other Comments**: The parents appreciated the break while their children were in camp (as detailed in Appendix C). The children reportedly made friends as well. Overall, it was a very resourceful program for families.

**Concerns**
Most parents shared the common complaint that they were not able to attend the meetings regularly because of work-schedule conflicts. Others felt the meetings were too long and ended too late. This made some parents less motivated to attend the meetings on a regular basis. Another concern the parents mentioned was the repetitive course materials while other material was not relevant for all. A few parents stated that they did not feel the group was a safe environment to share their issues as other parents could be judgemental at times. Many felt frustrated just attending the meetings as the concepts they learned were “easier said than done.” Hence, parents questioned if the methods they learned were making an impact on their family. As well, there were tensions around family dynamics and lack of explanations for some of the methods delivered in the meetings.

c) **Story Sharing**
The Questionnaire gave parents a space to share their stories in terms of the impact the Fast Track Program made on their children. Many stories reflected positive outcomes for both parents and children. These stories came out of group meetings, one-on-one home visits and changes parents observed in daily life.

**Impact on Parents**
- **Praise**: The majority of parents found that using “praise” was one of the most helpful techniques they learned in the group meetings. They now exercise this technique at home and have noticed major changes in their child’s attitude. One parent shared, “I am praising [him] more and it is easier than before...He has learned respect...” Another parent said, “The idea of compliments has helped
change a few bad days to excellent ones. When things seem really rough, I start reinforcing positives with compliments to turn the day around.”

• **Improved Communication**: The parents said their communication with their child improved due to more open and positive communication patterns. When parents tried to communicate to their children using “explanations, expectations and consequences,” children were able to listen and understand. Hence, the vicious cycle of poor communication was eliminated. Non-verbal communication was also mentioned as an effective means of parent-child communication. Parents used more “eye contact” to communicate, as one parent noted, “I used to have to tell him four times, now instead, if I get in his space, eye contact tells him he needs to clean his room.”

• **Better Parent-Child Relationships**: Because families are now praising their children more often and having more open communication, they reported that the parent-child relationship is better and closer. Families are doing things together more often, as one parent said, “We are a lot more open now. He comes for hugs, I love it!”

• **Decreased Stress Levels**: Parents who used frequent praise and effective communication styles said they felt calmer and less anxious. They also said they are paying more attention to their stress levels and making sure they do not get angry as easily. One parent said, “Stay calm, [and] get your point across.” Another parent shared, “I’m able to [be] more mellow in how [I] deal with things.”

**Impact on Children**

• **Improved Behaviours**: The parents shared that their children are becoming more polite and respectful. They are gaining more control over their emotions and are much calmer during times of conflict. The children are also more independent and are starting to take responsibility for their behavior. They even help with house chores without asking. Many are now braver and more courageous as their sense of security has increased.

• **Improved Communication**: The parents indicated that children have now started to express their ideas and articulate those ideas to others more frequently; the communication style is more open and positive. Parents said that though the children are still not honest or respectful at all times, overall, they are communicating in a more open manner with their parents, which results in a better parent-child relationship. One parent shared, “She has the courage and confidence to say what is on her mind, deal with her private issues ...” Another parent stated, “You can talk to her without screaming; [it’s] calmer to talk to her. She is becoming more and more open, talking about feelings and asking questions.”

• **Increased Social Skills**: The children are making friends more easily and as a result are feeling less isolated and alone. Even if they are alone at home, children
are typically engaged in positive behaviours, such as reading and studying more. When children are at the school, they are “sharing a lot more” and learning “to deal with [problems] with setting boundaries.” Children also learned to “care about others,” which makes it easier for children to maintain friendships.

- **Transformed Emotions:** The children are happier, not as moody. They have more confidence now. One parent said, “He likes to talk to people and [is] not afraid to stand up for himself.” The children also learned various techniques to control their anger. As one parent stated, “No more spontaneous attitude.” In addition, children have reportedly become more “independent.”

- **Other Comments:** Some parents noted that various external factors may have played a role in their child’s development. One of the factors mentioned was medication. If the child received regular medication, then the change in behaviour might be due to the medication and not the techniques learned in the Program. Some parents found that their children were still hard to deal with because the techniques they learned were not especially helpful. In addition, parents mentioned that the family situation plays a vital role in terms of child development. Some parents stated that they were dealing with mental-health issues or going through separation and/or other personal matters. One parent shared his/her frustration, “He’s been bullying us...we need counselling, I’m working on it.”

3) **Results Based on the Partners (Inter-Agency Collaborators) Questionnaire**

Four collaborators took part in the Partners Questionnaire and offered their candid feedback by answering open-ended questions. The qualitative comments used thematic analysis and were summarized by the order of the topics from the questionnaire.

3.1 **Collaboration**

The partners were asked if they found the partnership with Hull and the Calgary Board of Education (CBE) collaborative in nature. Three out of four partners stated that the collaboration between Hull/CBE was “excellent.” Those who responded “excellent” felt their feedback was listened to and acted upon quickly. If the partners were not in agreement, they were able to “think outside the box” in order to resolve the issue. The partners also valued the team discussions. Some mentioned that the partnership was open to change and keen to move forward. They further reported that the stakeholders were honest with each other and tried to understand the schools’ culture while maintaining flexibility in various situations.

3.2 **Meeting Partners’ Expectations**

The partners also agreed that Hull’s PATHS curriculum, one component of the Fast Track Program, met their expectations. In particular, they stated that Hull provided support for difficult children, advocated for the family, and respected and honoured the schools’ principles as well as the teachers’ work. The partners further praised Hull for its commitment to the Program and its follow through, which is “processed with time,
“materials, staff and support.” The partners stated they wanted the Program to continue and to see what other positive changes could be made.

3.3 Effectiveness of the Program
The partners were asked about the effectiveness of the Fast Track Program in meeting the needs of the target children, as the partners noted that the children’s needs are vast and complex. The partners recognized that for some children, the program is a journey, not a quick fix. The program is “good at bridging and repairing the home,” said one partner. Hence, it is important to recognize that the level of effectiveness is equal to the level of parents’ acceptance and support. Meaning the family members need to participate in the Program to the best of their abilities in order to maximize outcomes. As well, the children need to receive on-going tutoring and participate in homework clubs as well as recreational activities to maintain a “major level of self-esteem.” The partners noted that if these activities were implemented, the Program would be better able to meet the needs of the children.

The partners were asked if the Fast Track Program effectively met the students’ needs. Overall, the responses were positive. The partners reported that the students’ common language skills and problem-solving skills had increased as well children felt a sense of belonging. Furthermore, the teachers benefited as they now had a common way of solving problems. However, one partner mentioned that, “We still need help with bullying.” The partner suggested working collaboratively and being consistent with children in terms of reinforcing their positive behaviours.

The partners recognized that the intervention of PATHS works well for the whole school. Additionally, the Program helps to build on children’s strengths and encourages spirit and enthusiasm. The Program also seeks to boost individual children’s self-esteem and willingness to learn. Overall, the partners felt it was a good program.

3.4 Endorsement of the Program
Every partner replied that if they had to do it over again, they would enter into the partnership with Hull. They all stated that the stories of change were so powerful and the benefit so concrete that they would not hesitate to form such a partnership again. However, one partner felt it would be beneficial to make PATHS more context specific. That is, PATHS needs to fit the learner and the lesson.

3.5 Helpful Staff
The partners found that the staff from Hull and the Fast Track Program were outstanding and provided constant support to the teachers. The partners, in turn, learned from Hull’s staff and greatly appreciated their expertise and perspectives.

3.6 Suggested Improvements
A few improvements were suggested by the partners, such as less frequency in meeting and ensuring training with support staff in the school. They also suggested having a PowerPoint presentation with the final evaluation results as well as clarification on their respective roles and expectations.
The partners also commented that there is a bit of “pressure” with PATHS. In spite of this, the partners said they sensed a healthy tension between Hull and their partners. Although the partners have different philosophies, they have the same goal. Therefore, it is in the best interest of the children to address the issues openly.

4) Results Based on Teacher Focus Groups

Two focus groups were held to gather feedback from teachers who were the most involved with the Fast Track Program. The Teachers selected were those who had good connections with the students and had the most knowledge about the program. A total of six teachers participated in the focus groups. The following is a list of common themes that emerged from the discussions. The themes were analyzed and grouped using thematic coding.

**Overall Benefits**

- **Consistency:** The teachers agreed that incorporating the Fast Track Program in the classroom and introducing the PATHS curriculum, a component of Fast Track program, produced greater consistency for the children. For example, teachers pointed out that the children and parents now use a common language and common problem-solving techniques to address their issues.

  The teachers mentioned that another technique that adds consistency is the “Control Signal Poster.” Students and teachers are able to use this method as a guideline to work out issues. The same method is transferred to the children’s home environment, with the same guidelines explained in the letter the teachers send home to parents to inform them of their child’s behavioural issues.

- **Increased Confidence:** The teachers explained that when the children’s confidence is strengthened, their learning ability and behaviours improve as well. Furthermore, the child’s ability to solve problems is also enhanced. Teachers said that the children are now more mature and more respectful of others. The children not only have higher self-esteem after being in the Program, but have begun to model their learned behaviours to new children in the Program.

- **Better Communication:** The teachers agreed that the children’s verbal skills increased as a result of the Program. In particular, they noted, the children are more aware of their feelings and are using more appropriate words to express their emotions. The teachers further stated that as the children feel more comfortable with the Fast Track staff, they are sharing their feelings more openly.

  Communication is not only better for the children, but also for the parents and the teachers. The teachers reported that there are more connections between parents and children as well as parents and teachers. They also pointed out that they inform each other of a given child’s current development, enabling teachers to create better strategies to work with that child.
• **Better Parent-Child Relations:** The teachers stated that the parents’ involvement is crucial and constructive. It helps create a better parent-child relationship because children receive support from parents more frequently. The parents, in turn, learn to become more effective when working with their children. They also work as a team with teachers and take time to call teachers regularly. Because of the parents’ involvement in the Program, difficult situations are reduced and parents reportedly feel greater self-esteem.

• **Better Peer Relations:** The teachers stated that the children were now making friends more easily and were genuinely interested in each other. Their negative behaviours increasingly diminished as their involvement in the Program progressed. The teachers commented that the children were now more “tolerant, accepting and open” to other children in the Program.

• **Increased Academic Ability:** As the students are now receiving tutoring, the teachers indicated that their reading ability increased as did their overall academic performance. Additionally, the teachers felt that the students benefited from the companionship the tutors provided.

**Other Comments**

- **Integrate the Fast Track Program into Teaching:** The teachers explained that they integrated the principles of the Fast Track Program by matching teaching goals in the classroom. Other teachers used various strategies to integrate the Program, such as story telling, novel studies, compliments, group discussions and deep breathing.

- **Outstanding Staff Support:** All the teachers commented that staff members from the Fast Track Program were passionate and devoted. The staff members provided an extra pair of hands in the classroom and showed no bias or favouritism towards the children. The teachers stated that they were truly involved and deserve to be praised.

**5) Strengths and Limitations of the Dataset**

One of the main strengths of the dataset was a focus on outcome attainment. In addition, scores that checked for data integrity and distortions noted no problems with the dataset, meaning the results appear trustworthy.

In terms of the limitations of the dataset, the sample size was statistically small. In addition, only a portion of clients who entered the Program were tracked when they transferred to other schools. They were again assessed at the end of the pilot project. This resulted in some decline in assessment and sample size over time. Consequently, the results in this report should be viewed as preliminary and descriptive. Further discussions in terms of the relationships between groups, such as cohort comparison and in-depth conclusions could not be made. Inferential statistics are not reliable when using small sample sizes. Larger sample sizes may have resulted in samples whereby tests of significance could have been generated.
The sample is also too small to use any independent variables within the analyses. Thus, the investigation of differential results using such variables as gender, cultural background or parental involvement could not occur. As well, this evaluation did not make use of a control group nor was it possible to make comparisons to similar groups.

The measures in this report are related to client change and project outcome. However, the measures do not indicate the degree to which the Program followed the original Fast Track curriculum as was planned in the dissemination. On-going program consultation was provided by the University of Washington Fast Track site. While this report cannot comment on the fidelity of the Fast Track model, it can report on client-related outcomes.

The strength of the qualitative datasets lies in the clarity of the questions. As well, the qualitative results can be verified because they produce similar responses to the quantitative data. However, the sample size of the qualitative datasets set is small. The Partner Questionnaire only elicited four completed surveys, making it difficult to offer generalizations with respect to other stakeholders’ perspectives. Furthermore, the Teacher Focus Group should have had a structured interview guide and the questions should have been focused on the overall strengths and weaknesses of the Program as well as suggestions for improvement. In sum, the Teacher Focus Group was too small to gather homogenous feedback.

**DISCUSSION**

The key finding of this investigation is that the Program appeared to assist client change over the period of the intervention, making it consistent with the published research trials. The overall outcome indicates client change, including change in behavioural problems and academic issues. There is evidence that change also occurred in terms of the children’s social-skill development, peer relations and parent-child interactions. Some change also occurred with respect to more positive teacher-student interactions.

The key goal of the Fast Track Program is to prevent the further development of behavioural difficulties related to anti-social behaviours at an early age. Evidence indicates that positive social-skill development occurred, as did simultaneous reductions in behavioural problems and issues. Success related to conduct problems includes both these concepts. As such, it appears the clients in this sample benefited from the Fast Track interventions. Severe behavioural problems were not indicated within this client sample. Although some positive changes may be caused by external factors, such as a decrease in the “throws tantrum” score as the child matured, the results still support the benefits of the Fast Track Program. An examination of the evidence clearly demonstrates the clients in Fast Track changed over time, acquiring pro-social behaviours and meeting the goals of the Program.

The key evaluation limitations include the lack of a control group and small sample size. Without a larger comparison group, it is difficult to determine if the client changes were greater than similar groups who did not participate in the Fast Track Program. That said, it should be noted that although the evaluation sample is very small, it reflects the small project size and accompanying resources allocated to this pilot.
Based on the results of this evaluation, it is recommended that the Fast Track Program continue. Without a doubt, this model should be further disseminated in order to deter serious anti-social behaviours and to encourage positive change in high-risk school-aged children. In sum, the results indicate a positive impact on children.
REFERENCES


Appendix A: Summary of Instruments

The following summarizes each of the instruments used in the analyses:


3. HOMES Issue Severity Scale\(^3\). The HOMES is a multidimensional assessment for use in human services that intend to monitor client change (Ernst, 2000; Ernst, 2004). The HOMES Issue Severity Scale is based upon an assessment of reasons for service, client needs, or client issues that have been presented to a service as requirement for intervention. The HOMES Issue Severity Scale is completed by program staff with input from clients and involved professionals and paraprofessionals. The scale was developed to assess general and specific outcome. General positive outcome is indicated by reductions in the Issue Severity Total Score which signifies reduced severity of needs/issues and client risk. Specific outcome is indicated by change in subscales scores and specific need or issue items. Examples of subscales include: Behavioural Problems, Academic Issues, Relationship and Peer Issues, Family Parenting Issues, and Safety Issues. Specific client needs or reasons for service can be analyzed at an item level and a determination of risk reduction may also occur.

4. Social Health Profile\(^4\). Social Health Profile is a measure completed by teachers reflecting three dimensions of behavioural adjustment to school: Cognitive Concentration, Authority Acceptance, and Social Contact. The scales assess attentional skills and academic performance (Cognitive Concentration), aggressive and disruptive behaviour (Authority Acceptance), and shyness/social withdrawal (Social Contact). In

\(^1\) Retrieved from the website: http://www.agsnet.com/group.asp?nGroupInfoID=a30000
\(^2\) Retrieved from the website: http://www.agsnet.com/group.asp?nGroupInfoID=a30000
\(^3\) Retrieved from the website: http://www.hmrp.net/CanadianOutcomesInstitute/SoftwareDescription.htm
\(^4\) Retrieved from the website: http://www.fasttrackproject.org/allmeasures.htm
addition, nine items were drawn from the Social Competence Scale. Five of these items reflect prosocial behaviours and four represent emotion regulation.


6. Teacher Post Ratings. The Teacher Post Ratings scale is a 10-item instrument that assesses changes in a child's academic performance and behavioural functioning over the course of a school year. Each item on the scale describes a particular ability that a child may display. The teacher assesses how the child's performance or behaviour has changed - in terms of the ability stated in each item - since the beginning of the school year. This measure contains two subscales: Academics and Prosocial Behaviour.

7. Parent Questionnaire. The Parent Questionnaire evaluates parenting practices. This 27-item questionnaire, describes situations or interactions that occur with parents and children, contains statements about the parent’s confidence and general ability in managing the child, and explores how consistently two parents agree about discipline practices. Three scales for the Parent Questionnaire: Appropriate / Consistent Discipline, Warmth / Involvement and Harsh / Physical Discipline. As well, two additional items are used to measure Inter-Parental Consistency (for two parent families only). This questionnaire can be used as a general measure of the parent's appropriate and consistent discipline, their warmth and involvement with the child and the parent's self-report of harsh or physical discipline toward the child.

8. Being A Parent. The Being a Parent scale is an adaptation of the Parenting Sense of Competence Scale (Gibaud-Wallston & Wandersman, 1978), which assesses parenting self-esteem. The 12 items assess Parenting Satisfaction, an affective dimension reflecting parenting frustration, anxiety, and motivation, and Parenting Efficacy, an instrumental dimension reflecting competence, problem-solving ability, and capability in the parenting role.

9. Parent and Teacher Involvement Measure – Teacher. The Parent and Teacher Involvement Measure - Teacher is a 21-item measure to assess aspects of parent and teacher involvement. It assesses the amount and type of contact that occurs between parents and teachers, the parent's interest and comfort in talking with teachers, the parent's satisfaction with their children's school and the parent's degree of academic stimulation with their children. The instrument contains three subscales, assessing:

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5 Ibid.
6 Retrieved from the website: http://www.fasttrackproject.org/allmeasures.htm
7 Ibid.
8 Ibid.
9 Ibid.
parent's comfort in their relationship with the teacher and the school in general; the parent's involvement and volunteering at their child's school and parent-teacher contact.

10. Parent-Teacher Involvement Questionnaire: Parent Version\textsuperscript{10}. The Parent-Teacher Involvement Questionnaire: Parent version is a 26-item measure to assess components of parent and teacher involvement. The measure assesses the amount and type of contact that occurs between parents and teachers, the parent's interest and comfort in talking with teachers, the parent's satisfaction with their children's school and the parent's degree of involvement in the child's education. There are four factors within the measure and constructed corresponding subscales, including: Quality of the Relationship between Parent and Teacher; Parent's Involvement and Volunteering at School; Parent's Endorsement of Child's School; and Frequency of Parent-Teacher Contact.

11. Post-Intervention Ratings of Child and Parent Change\textsuperscript{11}. The Post-Intervention Ratings of Child and Parent Change is a 20-item instrument that measures parent's perceptions of change of their own behaviour and of their child's behaviour. This measure is divided into two parts. The first nine items concern the child's behaviour across the school year. The second part of the measure contains 11 questions where the parent rates the change of his/her own behaviour toward the target child. There are two subscales for this measure. The first subscale is the Rating of Change of Child and the second subscale is the Rating of Change of Parent.

\textsuperscript{10} Ibid.
\textsuperscript{11} Retrieved from the website: http://www.fasttrackproject.org/allmeasures.htm
Appendix B: Charts and Item Analyses

A. Overall Outcome

**Percent of Clients with a Change in Scores from Pre to Post Intervention**

![Chart 1: HOMES Pre to Post Issue Severity Scale, Total Scores](image)

**Key Impact Areas**

![Chart 2: Key Impact Areas](image)
B. Externalized Behavioural Problems

**BASC - Parent Rating Scale:**

**Throws Tantrums**

<table>
<thead>
<tr>
<th>Category</th>
<th>Pre</th>
<th>Post</th>
</tr>
</thead>
<tbody>
<tr>
<td>Never</td>
<td>10.53</td>
<td>5.00</td>
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<tr>
<td>Sometimes</td>
<td>45</td>
<td>50</td>
</tr>
<tr>
<td>Often or Almost Always</td>
<td>55.26</td>
<td>34.21</td>
</tr>
<tr>
<td>Always</td>
<td>18.42</td>
<td>10.53</td>
</tr>
</tbody>
</table>

**Chart 3.** Throws Tantrums

**BASC - Parent Rating Scale:**

**Hits Other Children**

<table>
<thead>
<tr>
<th>Category</th>
<th>Pre</th>
<th>Post</th>
</tr>
</thead>
<tbody>
<tr>
<td>Never</td>
<td>10.53</td>
<td>10.53</td>
</tr>
<tr>
<td>Sometimes</td>
<td>55</td>
<td>35</td>
</tr>
<tr>
<td>Often or Almost Always</td>
<td>71.05</td>
<td>18.42</td>
</tr>
<tr>
<td>Always</td>
<td>18.42</td>
<td>10.53</td>
</tr>
</tbody>
</table>

**Chart 4.** Hits Other Children
Chart 5. Gets into Trouble in the Neighbourhood

Chart 6. Threatens to Hurt Others
C. Social Skills Development

**BASC - Parent Rating Scale:**
Gives Good Suggestions for Problem Solving

<table>
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<th>Post</th>
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<tbody>
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<td></td>
</tr>
<tr>
<td>Sometimes</td>
<td>59.46</td>
<td>40</td>
</tr>
<tr>
<td>Often or Almost Always</td>
<td>35</td>
<td>35.14</td>
</tr>
</tbody>
</table>

**Percent of Clients Rated in Each Category**

**Chart 7.** Gives Good Suggestions for Problem Solving

**BASC - Parent Rating Scale:** Is a Good Sport

<table>
<thead>
<tr>
<th>Category</th>
<th>Pre</th>
<th>Post</th>
</tr>
</thead>
<tbody>
<tr>
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<td>Sometimes</td>
<td>59.46</td>
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</tr>
<tr>
<td>Often or Almost Always</td>
<td>35</td>
<td>35.14</td>
</tr>
</tbody>
</table>

**Percent of Clients Rated in Each Category**

**Chart 8.** Is a Good Sport
Chart 9. Ability to Stop and Calm Down When Excited or Upset
D. Peer Relations

**BASC - Parent Rating Scale:**
**Complains about Not Having Friends**

<table>
<thead>
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<th>Category</th>
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<th>Post</th>
</tr>
</thead>
<tbody>
<tr>
<td>Never</td>
<td>28.95</td>
<td>100</td>
</tr>
<tr>
<td>Sometimes</td>
<td>57.89</td>
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</tr>
<tr>
<td>Often or Almost Always</td>
<td>13.16</td>
<td>0</td>
</tr>
</tbody>
</table>

**Percent of Clients Rated in Each Category**

**Chart 10.** Complains about Not Having Friends

**BASC - Parent Rating Scale:**
**Offers to Help Other Children**

<table>
<thead>
<tr>
<th>Category</th>
<th>Pre</th>
<th>Post</th>
</tr>
</thead>
<tbody>
<tr>
<td>Never</td>
<td>2.63</td>
<td>0</td>
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<tr>
<td>Sometimes</td>
<td>50</td>
<td>47.36</td>
</tr>
<tr>
<td>Often or Almost Always</td>
<td>47.36</td>
<td>65</td>
</tr>
</tbody>
</table>

**Percent of Clients Rated in Each Category**

**Chart 11.** Offers to Help Other Children
Chart 12. Has Friends Who are in Trouble

Chart 13. Child’s Ability to Get Along with Other Children
E. Parent-Child Relations

**Chart 15.** You Honestly Believe You Have All the Skills to be a Good Parent

**Chart 16.** How Often do You Feel You are Having Problems Managing Your Child
Post Intervention Ratings:
How Well do You and Your Child Get Along with Each Other

![Bar chart showing the percent of clients rated in each category for how well they get along.]

Chart 17. How Well do You and Your Child get Along with Each Other

Post Intervention Ratings:
Your Child’s Ability to Follow Rules

![Bar chart showing the percent of clients rated in each category for their ability to follow rules.]

Chart 18. Your Child’s Ability to Follow Rules
Post Intervention Ratings:
Your Ability to Increase Your Child’s Positive Behaviour

<table>
<thead>
<tr>
<th>Percent of Clients Rated in Each Category</th>
<th>Worse</th>
<th>A little Improved</th>
<th>Much Improved</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>10</td>
<td>20</td>
<td>45</td>
</tr>
</tbody>
</table>

Chart 19. Your Ability to Increase Your Child’s Positive Behaviour
F. Academic Issues

Post Intervention Ratings:
Your Child's Ability to Read

Chart 20. Child’s Ability to Read

Social Competence Scale:
Follows Teacher's Verbal Directions

Chart 21. Follows the Teacher’s Verbal Instructions
Appendix C: Summary of Fast Track Components

PATHS (Promoting Alternative Thinking Strategies)
PATHS is a universal program for educators to aid development of self-control, emotional awareness and interpersonal problem solving skills to every student in the classroom. The PATHS curriculum provides teachers with a systematic developmental procedure for enhancing social competence and understanding in children. Key components include the followings:
- Emotional Understanding
- Self Control
- Social Problem Solving
- Peer Relations
- Violence prevention

Classroom Support
Children at risk of conduct disorder frequently have difficulty in the classroom. These children can have issues with peers, are defiant with the teacher and have problems with academics. Fast Track staff provides support to target children in their classrooms with academic and behavioral issues, such as:
- Build positive relationship between the child with their teacher and classmates
- Generalization of PATHS and Friendship group concepts
- Resource for behavioural and academic support and referrals

Friendship Group
Friendship groups are conducted weekly for 22 sessions in grade one, bi-weekly in grade two for 14 sessions and monthly in grades three to six for 8 sessions during non-school hours.

Friendship groups provide a second level of more intensive remedial intervention for high-risk children. The friendship group program targets the same skills as the universal PATHS program and uses the same cues and labels to support social skill development. These are the skills:
- Emotional Understanding
- Self-control
- Social Problem Solving
- Friendship Initiation
- Cooperation
- Negotiation
- Conflict Management
- Resiliency

Peer Pairing
Peer pairing sessions promote the generalization of positive social skills to the school setting and to increase the likelihood that these skills would be observed and responded to positively by classroom peers. Peer pairing session provide a second level of more
intensive remedial intervention for high-risk children during weekly half hour guided play sessions during the school day with a classroom peer.

- Reinforce PATHS/Friendship Group Skills
- Strengthen Self-Efficacy and resiliency
- Promote Generalization with Classmates
- Reduce reputation bias

**Tutoring**

Learning difficulties and academic failure frequently accompany social and behavioural problems at school and to poor adjustment outcomes. Academic tutoring is provided to all identified high-risk children during first and second year twice a week for the school year, with a focus on literacy.

- Promote basic reading skills
- Competency based progression
- Supportive adult-child relationship

**Parent Group**

Parent groups are conducted weekly for 22 sessions in grade one, bi-weekly in grade two for 14 sessions and monthly in grades three to six for 8 sessions during non-school hours. Parent groups provide a safe forum to discuss appropriate developmental expectations of the target children, positive parenting techniques and effective discipline and encourage involvement in their child’s academics.

- Promote positive family–school relationships
- Parental self control
- Reasonable-appropriate expectations for child
- Parenting skills
- Support from other parents

**Parent-Child Sharing Time (PCST)**

PCST takes place immediately after the Friendship and Parent groups and provides an opportunity to foster positive parent-child relationships through activities and role plays. PCST also provides a chance for parents and children to practice skills learned during the groups with the guidance and support from Fast track staff.

- Foster positive parent-child relationship
- Parenting skills practice
- Child skills practice

**Home Visiting**

Visits to the family’s home by Fast Track staff promote the generalization of positive social skills to the home environment and allow skills to be observed individualized for each family. Trust and a positive relationship develop between the family and Fast Track staff when staff is able to respond to family’s issues directly.

- Build positive relationship with the family
- Generalization of parent skills
- Parental Support for child school adjustment
- Parental problem solving, coping skills and goal setting
Recreation
Funds, staff support, activities are provided to encourage an active lifestyle and positive family time. Examples of recreation activities include family fun days, money or passes to events or activities, day and overnight camps for kids during school break.
• Promote family activities, positive time together
• Promote health and wellness
• Provide resources for activities

Fast Track Recruitment
Fast Track employs a multiple gate screening procedure to select the Fast Track target children. Children are recruited in the involved schools in high-risk neighborhoods (as determined by young offender crime). The first level of screening is a teacher completed behaviour checklist completed on every child in every kindergarten classroom. The children with the highest disruptive behavior scores were included in the next level of screening, which is a parent completed behavior checklist that is competed over the telephone. Children in the final high-risk sample represent the approximate top 10% of the screened sample.

Issues for Children at Risk of Conduct Disorder
This is not a complete listing of challenges for children at-risk, but will give some insight into the behavior in which the basic rights of others or major age-appropriate societal norms or rules are violated. These issues are long term, repetitive and pervasive. (As taken from the Diagnostic criteria for Conduct Disorder (312.8)

Aggression to people and animals
• Often Bullies, threatens, intimidates
• Often Initiates physical fights
• Has used weapons that can cause serious physical harm
• Has been physically cruel to people and/or animals
• Has stolen while confronting a victim
• Has forced someone into sexual activity

Destruction of property
• Has deliberately engages in fire setting with intention of causing damage
• Has deliberately destroyed other’s property

Deceitfulness of theft
• Has broken into some else’s home, building or car
• Often lies to obtain goods or favour or to avoid obligations (cons others)
• Has stolen items of nontrivial value without confronting a victim

Serious violations of rules
• Often stays out at night despite parental prohibitions, beginning before age 13
• Has run away from home overnight at least twice while living in parental or caretakers home
• Is often truant from school, beginning before age 13

Other considerations:
• These children do not easily make and keep friends. They usually befriend children much younger than themselves.
• Children with conduct disorder have difficult relationships with both parents and teachers.
• Children with conduct disorder do not adhere to usual societal norms and expectations. They do not respect authority.
• Children with conduct disorder can have limited feelings of empathy, guilt or regret.
• Often they misperceived intentions of others as more hostile and threatening than is the case, and respond in kind.
• Often feel their actions are reasonable and justified
• Often these children suffer from low self esteem, although project a image of toughness
• These children have poor frustration tolerance, irritability, temper outbursts and recklessness.
• Early onset of sexual behavior, smoking, drinking, drugs and risk taking activity.