

GUIDEBOOK

Published January 2023

Downloaded from <https://guidebook.eif.org.uk/programme/4rs2ss>

4Rs2Ss

Review: January 2021

Note on provider involvement: This provider has agreed to EIF's terms of reference, and the assessment has been conducted and published with the full cooperation of the programme provider.

4Rs2Ss is targeted at families who have a child between 7 and 11 years old who are diagnosed with oppositional defiant disorder or conduct disorder. All children over six years of age in the family are invited to attend the programme.

4Rs2Ss is comprised of 16 sessions and it is delivered by 2 practitioners in a multiple family group format to families with children between 7 and 11 years old who are diagnosed with oppositional defiant disorder or conduct disorder. The intervention is focused on 4 Rs (Rules, Relationships, Respectful Communication, Responsibilities) and the 2 Ss (Stress and Support) that are expected to mediate caregiver stress, child behavioral difficulties and family functioning.

Evidence
rating: **2**

Cost rating: **1**

EIF Programme Assessment

4Rs2Ss has **preliminary evidence** of improving a child outcome, but we cannot be confident that the programme caused the improvement.

Evidence
rating: **2**

What does the evidence rating mean?

Level 2 indicates that the programme has evidence of improving a child outcome from a study involving at least 20 participants, representing 60% of the sample, using validated instruments.

This programme does not receive a rating of 3 as its best evidence is not from a rigorously conducted RCT or QED evaluation.

Cost rating

A rating of 1 indicates that a programme has a low cost to set up and deliver, compared with other interventions reviewed by EIF. This is equivalent to an estimated unit cost of less than £100.

Cost rating: **1**

Child outcomes

According to the best available evidence for this programme's impact, it can achieve the following positive outcomes for children:

Supporting children's mental health and wellbeing

Improved social skills

Based on study 1a

Based on study 1d

Improved impairment

Based on study 1b

Preventing crime, violence and antisocial behaviour

Reduced oppositional defiant behaviours

Based on study 1a

Based on study 1b

Based on study 1c

Based on study 1d

This programme also has evidence of supporting positive outcomes for couples, parents or families that may be relevant to a commissioning decision. Please see the 'About the evidence' section for more detail.

Key programme characteristics

Who is it for?

The best available evidence for this programme relates to the following age-groups:

- Primary school

How is it delivered?

The best available evidence for this programme relates to implementation through these delivery models:

- Group

Where is it delivered?

The best available evidence for this programme relates to its implementation in these settings:

- Children's centre or early-years setting
- Primary school
- Community centre
- In-patient health setting
- Out-patient health setting

The programme may also be delivered in these settings:

How is it targeted?

The best available evidence for this programme relates to its implementation as:

- Targeted selective
-

Where has it been implemented?

United Kingdom, United States

UK provision

This programme has been implemented in the UK.

UK evaluation

This programme's best evidence does not include evaluation conducted in the UK.

Spotlight sets

EIF includes this programme in the following Spotlight sets:

- improving interparental relationships programmes for children with recognised or possible special education needs
-

About the programme

What happens during delivery?

How is it delivered?

- 4Rs2Ss is delivered in 16 sessions of around 1 hours' duration each by 2 practitioners, to groups of families

What happens during the intervention?

- During each session, families participate in conversations about an R (Rules, Relationships, Responsibilities, Respectful Communication) or S (Stress or Support).
- Families then reflect, practice a skill associated with the "R" or "S" of the day, and discuss how to practice it during the week outside of the group.

What are the implementation requirements?

Who can deliver it?

- The two practitioners who deliver this programme are a Social Worker or Mental Health Counselor with NFQ-9/10 level qualifications and one Family Peer Advocate or Family Advocate with NFQ-6 level qualifications.

What are the training requirements?

- The practitioners have 5.5 hours of programme training. Booster training of practitioners is not required.

How are the practitioners supervised?

- It is recommended that practitioners are supervised by one clinical supervisor (qualified to NFQ-9/10 level) with 5.5 hours of programme training.

What are the systems for maintaining fidelity?

- Programme fidelity is maintained through the following processes:
 - Training manual
 - Other printed material
 - Other online material
 - Fidelity monitoring
 - Virtual training and online learning modules

Is there a licensing requirement?

There is no licence required to run this programme.

How does it work? (Theory of Change)

How does it work?

- 4Rs2Ss aims to help decrease behavioral difficulties in children and help families improve their communication, their relationships, their family rules, and their satisfaction with services.
- Families that participate in this programme practice targeted skills that can mediate caregiver stress and child behavioral difficulties.
- In the longer term, children will have less behavior problems and improved relationships with their families and caregivers.
- Participation in the programme will reduce the stigma associated with raising a child with mental health issues by normalising each family's experience, therefore increasing receptivity to participation.

Intended outcomes

Supporting children's mental health and wellbeing

Contact details

Kara M. Dean-Assael Director of Clinical Innovation and Practice at the NYU
McSilver Institute for Poverty Policy and Research

kara.dean@nyu.edu

About the evidence

4Rs2Ss' most rigorous evidence comes from one comparison group study conducted in the United States.

This programme is underpinned by one study with a Level 2, hence the programme receives a Level 2 rating overall.

Study 1a

Citation: Chacko et al., 2015

Design: Comparison group study

Country: United States

Sample: 320 children between the ages of 7-11 and their families

Timing: Post-test; 4-month follow-up

Child outcomes:

- Improved social skills
 - Reduced oppositional defiant behaviours
-

Other outcomes:

- None measured
-

Study rating: 2

Chacko, A., Gopalan, G., Franco, L., Dean-Assael, K., Jackson, J., Marcus, S., Hoagwood, K., & McKay, M. (2015). Multiple Family Group Service Model for Children with Disruptive Behavior Disorders: Child Outcomes at Post-Treatment. *Journal of Emotional and Behavioral Disorders*, 23(2), 67–77.

Available at: <https://journals.sagepub.com/doi/10.1177/1063426614532690>

Study design and sample

This study is a non-random alternating assignment study including 13 community-based outpatient mental health clinics in New York City metropolitan area.

In each clinic, the first 6-8 families whose children were screened and met eligibility criteria were enrolled in the experimental condition. The next 3-4 families who were successfully screened and met eligibility criteria were then assigned to the comparison condition.

Measures

Child behavioural disorder was measured using the Iowa Connors Rating scale - Oppositional/Defiant Subscale

Child social skills were measured using the Social Skills Rating Scale.

Child functional impairment was measured using the Impairment Rating Scale (IRS)

Findings

This study identified statistically significant positive impact on a number of child outcomes. This includes:

- Reduced oppositional defiant behaviours
- Improved social skills

The conclusions that can be drawn from this study are limited by methodological issues pertaining to the baseline equivalence of the study groups, and accounting for clustering in the analysis, hence why a higher rating is not achieved.

Study 1b

Citation: Gopalan et al., 2015

Design: Comparison group study

Country: United States

Sample: 320 children between the ages of 7-11 and their families

Timing: Post-test; 4-month follow-up

Child outcomes:

- Improved impairment
 - Reduced oppositional defiant behaviours
-

Other outcomes:

- None measured
-

Study rating: 2

Gopalan, G., Chacko, A., Franco, L., Dean-Assael, K., Rotko, L. E., Marcus, S. M., Hoagwood, K. E., & McKay, M. M. (2015). Multiple Family Groups for Children with Disruptive Behavior Disorders: Child Outcomes at 6-Month Follow-Up. *Journal of Child and Family Studies*, 24(9), 2721–2733.

Available at: <https://link.springer.com/article/10.1007/s10826-014-0074-6>

Study design and sample

Gopalan et al., 2015 describes additional outcomes from study 1a described above. In this case:

- Child outcomes were measured post-test and at 4-month follow-up
- Child behavioural disorder was measured using the Iowa Connors Rating scale - Oppositional/Defiant Subscale
- Child social skills were measured using the Social Skills Rating Scale
- Child functional impairment was measured using the Impairment Rating Scale (IRS)
- This study identified statistically significant positive impact on a number of child outcomes. This includes reduced oppositional defiant behaviours, improved impairment with playmates and overall impairment and need for services

Study 1c

Citation: McKay et al., 2011

Design: Comparison group study

Country: United States

Sample: 320 children between the ages of 7-11 and their families

Timing: Post-test; 6-month follow-up

Child outcomes:

- Reduced oppositional defiant behaviours
-

Other outcomes:

- Parent Stress
-

Study rating: 2

McKay, M. M., Gopalan, G., Franco, L., Dean-Assael, K., Chacko, A., Jackson, J. M., & Fuss, A. (2011). A collaboratively designed child mental health service model: Multiple family groups for urban children with conduct difficulties. *Research on Social Work Practice*, 21(6), 664–674.

Available at: <https://journals.sagepub.com/doi/10.1177/1049731511406740>

McKay et al., 2011 describes additional outcomes from study 1a described above. In this case:

- Child outcomes were measured post-test and at 6-month follow-up
- Child behavioural disorder was measured using the Iowa Connors Rating scale - Oppositional/Defiant Subscale
- Child social skills were measured using the Social Skills Rating Scale
- Child functional impairment was measured using the Impairment Rating Scale (IRS)
- Parent stress was measured using the Parent Stress Index
- This study identified statistically significant positive impact on oppositional defiant behaviours

Study 1d

Citation: Small et al., 2015

Design: Comparison group study

Country: United States

Sample: 320 children between the ages of 7-11 and their families

Timing: Post-test; 6-month follow-up

Child outcomes:

- Improved social skills
 - Reduced oppositional defiant behaviours
-

Other outcomes:

- Parent Stress, Parent depression
-

Study rating: 2

Small, L., Jackson, J., Gopalan, G., & McKay, M. M. (2015). Meeting the complex needs of urban youth and their families through the 4Rs 2Ss Family Strengthening Program: The “real world” meets evidence-informed care. *Research on social work practice*, 25(4): 433–445.

Available at: <https://journals.sagepub.com/doi/10.1177/1049731514537900>

Small et al., 2015 describes additional outcomes from study 1a described above. In this case:

- Child outcomes were measured post-test and at 6-month follow-up
- Child behavioural disorder was measured using the Iowa Connors Rating scale - Oppositional/Defiant Subscale
- Child social skills were measured using the Social Skills Rating Scale
- Child functional impairment was measured using the Impairment Rating Scale (IRS)
- Parent stress was measured using the Parent Stress Index
- Parent depression was measured using the Center for Epidemiological Studies Depression Scale
- This study identified statistically significant positive impact on a number of child outcomes. This includes reduced oppositional defiant behaviours and improved social skills

Guidebook

The EIF Guidebook provides information about early intervention programmes that have at least preliminary evidence of achieving positive outcomes for children. It provides information based on EIF's assessment of the strength of evidence for a programme's effectiveness, and on detail about programmes shared with us by those who design, run and deliver them.

The Guidebook serves an important starting point for commissioners to find out more about effective early interventions, and for programme providers to find out more about what good evidence of impact looks like and how it can be captured. As just one of our key resources for commissioners and practitioners, the Guidebook is an essential part of EIF's work to support the development of and investment in effective early intervention programmes.

Our assessment of the evidence for a programme's effectiveness can inform and support certain parts of a commissioning decision, but it is not a substitute for professional judgment. Evidence about what has worked in the past offers no guarantee that an approach will work in all circumstances. Crucially, the Guidebook is not a market comparison website: ratings and other information should not be interpreted as a specific recommendation, kite mark or endorsement for any programme.

[How to read the Guidebook](#)

[EIF evidence standards](#)

[About the EIF Guidebook](#)

EIF

The Early Intervention Foundation (EIF) is an independent charity and a member of the What Works network. We support the use of effective early intervention for children, young people and their families: identifying signals of risk, and responding with effective interventions to improve outcomes, reduce hardship and save the public money in the long term.

We work by generating evidence and knowledge of what works in our field, putting this information in the hands of commissioners, practitioners and policymakers, and supporting the adoption of the evidence in local areas and relevant sectors.

www.EIF.org.uk | [@TheEIFoundation](https://twitter.com/TheEIFoundation)

10 Salamanca Place, London SE1 7HB | +44 (0)20 3542 2481

Disclaimer

The EIF Guidebook is designed for the purposes of making available general information in relation to the matters discussed in the documents. Use of this document signifies acceptance of our legal disclaimers which set out the extent of our liability and which are incorporated herein by reference. To access our legal disclaimers regarding our website, documents and their contents, please visit eif.org.uk/terms-conditions/. You can request a copy of the legal disclaimers by emailing info@eif.org.uk or writing to us at Early Intervention Foundation, 10 Salamanca Place, London SE1 7HB.