

Coping Power

Review:

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.

Coping Power is a schools-based and parenting programme. It is a targeted indicated programme for children between the ages of 9 and 15 years, and their parents. It is delivered in schools, outpatient clinics and community centers, and aims to improve externalising and aggressive behaviour and substance misuse.

Coping Power aims to promote social cognitive processes, emotion regulation and effective parenting practices in order to protect against externalizing behaviour problems, aggressive behaviour, and substance misuse. The target population includes children who are identified as aggressive or disrupted.

During the programme, group sessions are held for children and parents, separately, led by a psychologist or social worker and a trained school counsellor. They include group discussion, role-play, videos, and behavioural goal-setting. These are aimed at enhancing children's social perspective taking, goal setting, problem solving, social skills, and resistance to peer pressure, and at enhancing parents' positive parenting, effective discipline and monitoring, family cohesion, and stress management.

Evidence
rating: **3+**

Cost rating: **2**

EIF Programme Assessment

Coping Power has evidence of a **short-term positive impact** on child outcomes from at least one rigorous evaluation.

Evidence
rating: **3+**

What does the evidence rating mean?

Level 3 indicates **evidence of efficacy**. This means the programme can be described as evidence-based: it has evidence from at least one rigorously conducted RCT or QED demonstrating a statistically significant positive impact on at least one child outcome.

This programme does not receive a rating of 4 as it has not yet replicated its results in another rigorously conducted study, where at least one study indicates long-term impacts, and at least one uses measures independent of study participants.

What does the plus mean?

The plus rating indicates that this programme has evidence from at least one level 3 study, along with evidence from other studies rated 2 or better.

Cost rating

A rating of 2 indicates that a programme has a medium-low cost to set up and deliver, compared with other interventions reviewed by EIF. This is equivalent to an estimated unit cost of £100–£499.

Cost rating: **2**

Child outcomes

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

Preventing crime, violence and antisocial behaviour

Reduced aggressive behaviour

Based on study 1

Reduced delinquency

Based on study 2

Based on study 3

Key programme characteristics

Who is it for?

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

- Primary school
- Preadolescents
- Adolescents

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:

- Primary school
- Secondary school
- Community centre
- 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 indicated
-

Where has it been implemented?

United States, Canada, Australia, Singapore, Ireland, Italy, Netherlands, Sweden, Pakistan

UK provision

This programme has not 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:

- school based social emotional learning
-

About the programme

What happens during delivery?

How is it delivered?

- The child component of Coping Power is delivered in 24-36 sessions of one hour duration each by two practitioners to groups of children.
- The parent component of Coping Power is delivered in 12-16 sessions of one hour duration each by two practitioners to a group of parents.

What happens during the intervention?

- During the intervention children and parents engage in group discussion, role-play, and setting goals in school or home. They receive homework and positive feedback. Videos are also used in the sessions.
- Child sessions include behavioural and personal goal-setting, awareness of feelings, distraction techniques, relaxation methods, organisational skills and refusal skills.
- Parent sessions focus on rewarding appropriate child behaviour, giving effective instructions, establishing age-appropriate rules and expectations, applying consequences, and establishing good family communication.

What are the implementation requirements?

Who can deliver it?

- The practitioner who delivers this programme is a counsellor with QCF-7/8 level qualifications.

What are the training requirements?

- The practitioners have 32 hours of programme training. Booster training of practitioners is recommended.

How are the practitioners supervised?

- It is recommended that practitioners are supervised by one clinical supervisor (qualified to QCF-7 level), with 14 hours of programme training.

What are the systems for maintaining fidelity?

Programme fidelity is maintained through the following processes:

- Training manual
- Fidelity monitoring

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?

- Social cognitive processes, emotion regulation and effective parenting practices protect against externalising behaviour problems, delinquent behaviour, and substance misuse.
- Coping Power enhances children's social perspective-taking, goal setting, problem solving, social skills, and resistance to peer pressure, and enhances parents' positive parenting, effective discipline and monitoring, family cohesion, and stress management.
- Children receiving Coping Power have reductions in hostile attributions of others, and increases in more competent problem-solving and awareness of consequences for behaviours. Parents interact with children with more positively and with more consistent discipline.
- There is a reduction in children's externalising behaviour problems, and in the risk of problem aggressive and criminal behaviour and substance misuse.

Intended outcomes

Enhancing school achievement & employment Preventing crime, violence and antisocial behaviour Preventing substance abuse

Contact details

Shane Jones jones178@ua.edu

www.copingpower.com

About the evidence

Coping Power's most rigorous evidence comes from an RCT which was conducted in the US. This study identified statistically significant positive impact on child outcomes. This programme has evidence from at least one rigorously conducted RCT along with evidence from an additional comparison group study. Consequently, the programme receives a 3+ rating overall.

Study 1

Citation: Lochman et al., 2009

Design: RCT

Country: United States

Sample: 531 children between 8 and 9 years old (recruited in 3rd grade). They had been screened and recruited from the 30% most aggressive children, according to a screening assessment by their teachers.

Timing: Post-test

Child outcomes:

- Reduced aggressive behaviour
-

Other outcomes:

- None measured
-

Study rating: 3

Lochman, J. E., Boxmeyer, C., Powell, N., Qu, L., Wells, K., & Windle, M. (2009). Dissemination of the Coping Power program: Importance of intensity of counselor training. *Journal of Consulting and Clinical Psychology, 77*(3), 397–409

Available at

<https://psycnet.apa.org/record/2009-08093-003>

Study design and sample

The first study is a rigorously conducted RCT. This study involved random assignment of children to two treatment groups (Coping Power with training and feedback for practitioners, and with basic training for practitioners) and a Business As Usual control group. This study was conducted in the United States, with a sample of children who had been screened as being in the 30% most aggressive children, based on a teacher assessment. 65% of the sample were boys. The children were from Alabama, US. 84% of children in the sample were African Americans, 14% were Caucasians and 2% of other ethnicity.

Measures

- Assaultive behaviours were measured using the National Youth Survey (child self-report).
- Substance misuse was measured using the National Youth survey (child self-report).
- Behavioural problems were measured using the Behaviour Assessment System for Children (parent and teacher report).

Findings

This study identified a statistically significant positive impact on a child outcome. This includes assaultive behaviour. Note that the positive findings were only for the group with more intense training for practitioners (training and feedback).

Two further papers describe the same trial but do not record significant child outcomes:

- Lochman, J.E., Powell, N.P., Boxmeyer, C.L., Qu, L., Wells, K.C., & Windle, M. (2009). Implementation of a school-based prevention program: Effects of counselor and school characteristics. *Professional Psychology: Research and Practice, 40*(5), 476-482. FIELD TRIAL
 - Lochman, J. E., Boxmeyer, C. L., Powell, N. P., Qu, L., Wells, K., & Windle, M. (2012). Coping Power dissemination study: Intervention and special education effects on academic outcomes. *Behavioral Disorders, 37*(3), 192-205.
-

Study 2

Citation: Lochman & Wells., 2003

Design: RCT

Country: United States

Sample: 245 children in 5th and 6th grade. They had been screened and recruited from the 31% most aggressive children, according to a screening assessment by their teachers.

Timing: 1 year follow-up

Child outcomes:

- Reduced delinquency
-

Other outcomes:

- None measured
-

Study rating: 3

Lochman, J. E., & Wells, K. C., (2003). Effectiveness of the Coping Power Program and of Classroom Intervention With Aggressive Children: Outcomes at a 1-Year Follow-Up. *Behavior Therapy* 34. 493-515, 2003

Available at

<https://www.sciencedirect.com/science/article/abs/pii/S0005789403800321>

Study design and sample

The second study is an RCT. This study involved random assignment of children to one of four conditions: 1) Coping Power only, 2) A universal classroom-level intervention only, 3) Coping Power plus the universal classroom-level intervention and 4) Business as Usual control group. This study was conducted in the United States. Children received the intervention when they were in 5th and 6th grade. The findings in this study were collected 1-year post-intervention. Two-thirds of the sample were boys, and majority identified as African American, followed by a minority of Caucasian children, with only two Hispanic children and four other nationalities.

Measures

- Aggressive behaviour in the school setting was measured by the Teacher Observation of Classroom Adaption-Revised (TOCA-R) (teacher report)
- Substance use was measured by the Centre for Substance Abuse Prevention (CSAP) Student Survey (child self-report)
- Delinquency was measured by items drawn from the National Youth Survey (child self-report)

Findings

This study identified a statistically significant positive impact on one child outcome. This includes a reduction in delinquency for those in the Coping Power only group. Note that the conclusions from this study can only be drawn from the findings for the Coping Power only group, compared to the control group.

Two further papers describe the same trial but did not contribute to the rating due to methodological issues:

- Lochman, J. E., & Wells, K. C. (2002). The Coping Power program at the middle-school transition: Universal and indicated prevention effects. *Psychology of Addictive Behaviors*, 16(4S), S40-S54.
- Lochman, J. E., Wells, K. C., Qu, L., & Chen, L. (2013). Three year follow-up of Coping Power intervention effects: Evidence of neighborhood moderation? *Prevention Science*, 14(4), 364-376.

Study 3

Citation: Lochman & Wells., 2004

Design: RCT

Country: United States

Sample: 183 boys between 9 and 11 years old (fourth and fifth grade). They had been screened and recruited from the 22% most aggressive children, according to a screening assessment by their teachers.

Timing: Post-test; 1 year follow-up

Child outcomes:

- Reduced delinquency
-

Other outcomes:

- None measured
-

Study rating: 2

Lochman, J. E., & Wells, K. C. (2004). The Coping Power Programs for preadolescent aggressive boys and their parents: Outcome effects at the 1-year follow-up. *Journal of Consulting and Clinical Psychology*, 72(4), 571-578.

Available at

<https://pubmed.ncbi.nlm.nih.gov/15301641/>

Study design and sample

The third study is an RCT.

This study involved random assignment of children to two treatment groups (Coping Power for children only, and Coping Power for children and parents – multicomponent) and a Business as Usual control group. This study was conducted in the United States, with a sample of boys aged 9-11 years. 55% of the boys were in fourth grade at the start of the intervention, and 45% in fifth grade. 61% were African American, 38% Caucasian and 1% other ethnicity.

Measures

- Overt and covert delinquency were measured at one-year post-intervention using the National Youth Survey (child self-report)
- Substance use was measured using the National Youth Survey (child self-report).

Findings

This study identified statistically significant positive impact on one child outcome.

This includes a reduction in covert delinquency.

The conclusions that can be drawn from this study are limited by methodological issues pertaining to statistical models not controlling for baseline differences between the groups hence why a higher rating is not achieved.

Other studies

The following studies were identified for this programme but did not count towards the programme's overall evidence rating. A programme receives the same rating as its most robust study or studies.

Vanzin, L., Colombo, P., Valli, A., Mauri, V., Ceccarelli, S. B., Pozzi, M., ... & Nobile, M. (2018). The effectiveness of coping power program for ADHD: an observational outcome study. *Journal of Child and Family Studies*, 27(11), 3554-3563. **This study was excluded due to methodological issues relating to the randomisation process.**

Aitken, M., Waxman, J. A., MacDonald, K., & Andrade, B. F. (2018). Effect of Comorbid Psychopathology and Conduct Problem Severity on Response to a Multi-component Intervention for Childhood Disruptive Behavior. *Child Psychiatry & Human Development* <https://doi.org/10.1007/s10578-018-0800-1> **This study was excluded because it has no comparison group, and cannot contribute to the programme rating.**

Eiraldi, R., Mautone, J. A., Khanna, M. S., Power, T. J., Orapallo, A., Cacia, J., Schwartz, B. S., McCurdy, B., Keiffer, J., Paidipati, C., Kanine, R., Abraham, M., Tulio, S., Swift, L., Bressler, S. N., Cabello, B., & Jawad, A. F. (2018). Group CBT for externalizing disorders in urban schools: Effect of training strategy on treatment fidelity and child outcomes. *Behavior Therapy* . **This study was excluded because it has no comparison group, and cannot contribute to the programme rating.**

McDaniel, S. C., Lochman, J. E., Tomek, S., Powell, N., Irwin, A., & Kerr, S. (2018). Reducing levels of behavioral risk in late elementary school: A comparison of two targeted interventions. *Behavioral Disorders*, 43, 370-382. **This study was excluded due to a low sample size.**

In addition, a number of other studies were identified but excluded because they evaluated a different version of the programme (12 studies), a significantly different population (2 studies), or two different interventions (2 studies).

1

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.