

FRIENDS for Youth

Review: March 2017

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.

FRIENDS for Youth is part of a suite of FRIENDS programmes (including Fun FRIENDS and FRIENDS for Life), which aim to improve resilience (or coping) skills in children and reduce anxiety and improve mental health and wellbeing.

The programme is delivered in schools, and is based on cognitive behavioural therapy and positive psychology.

It is a universal programme (however, it has also been implemented as a selective and indicated programme, and has been targeted on the basis of income poverty).

Sessions involve large and small group work, workbook exercises, role plays, games, activities and quizzes, to help children to develop problem solving and coping plans, to use positive self-talk and evaluate themselves realistically, and to use relaxation techniques.

Evidence
rating: **3**

Cost rating: **1**

EIF Programme Assessment

FRIENDS for Youth 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.

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

Reduced anxiety

Based on study 1

0.53-point reduction on the Spence Children's Anxiety scale (self-report)

Improvement index: **+12**

This means we would expect the average participant in the comparison group who did not receive the intervention (ie, someone for whom 50% of their peers have better outcomes and 50% have worse outcomes), to improve to the point where they would have better outcomes than 62% and worse outcomes than 38% of their peers, if they had received the intervention.

Immediately after the intervention

Based on study 1

0.98-point reduction on the Spence Children's Anxiety scale for parents (parent report)

Improvement index: **+14**

This means we would expect the average participant in the comparison group who did not receive the intervention (ie, someone for whom 50% of their peers have better outcomes and 50% have worse outcomes), to improve to the point where they would have better outcomes than 64% and worse outcomes than 36% of their peers, if they had received the intervention.

Immediately after the intervention

Key programme characteristics

Who is it for?

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

- 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:

- Secondary school

The programme may also be delivered in these settings:

- Secondary school
- Out-patient health setting

How is it targeted?

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

- Targeted selective
-

Where has it been implemented?

Brazil, Canada, Finland, Hong Kong, Ireland, Japan, Mexico, Netherlands, Portugal, Scotland, Singapore, South Africa, Sweden, Taiwan, United Kingdom

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:

- school based social emotional learning
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About the programme

What happens during delivery?

How is it delivered?

- FRIENDS for Youth is delivered in five sessions of 2 to 2.5 hours' duration each, by one social worker, teacher, health worker, or psychologist to groups of children. In the best-evidenced implementation of FRIENDS, the programme was delivered in 10 sessions of one hour each.

What happens during the intervention?

- Sessions involve large and small group work, workbook exercises, role plays, games, activities, and quizzes. In addition, to reinforce and generalise the skills introduced in the sessions, homework tasks are assigned at the end of each session. It has three main components:
 - Learning/behaviour – involves helping children and adolescents to develop six-step problem-solving plans, using coping step plans, and identify role models and support networks.
 - Cognitive – involves helping children and adolescents to use positive self-talk, challenge negative self-talk, evaluate themselves realistically, and reward themselves.
 - Psychological – involves teaching children and adolescents to be aware of their body clues, to use relaxation techniques, and to self-regulate.

What are the implementation requirements?

Who can deliver it?

- The practitioner who delivers this programme is a psychologist, teacher or allied health professional with NFQ-7/8 level qualifications.

What are the training requirements?

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

How are the practitioners supervised?

- Supervision of practitioners is not required.

What are the systems for maintaining fidelity?

- Training manual
- Other online material
- Face-to-face training
- Facilitator manual

Is there a licensing requirement?

Yes, there is a licence required to run this programme.

How does it work? (Theory of Change)

How does it work?

- Coping skills help youth to manage their anxiety and protect themselves from developing anxiety disorders.
- The programme aims to teach coping skills such as understanding and managing emotions to assist youth in responding to uncomfortable emotions in appropriate and helpful ways.
- In the short term, youth have better awareness of their emotions and helpful emotion management techniques that enable them to better cope with stressful or uncomfortable situations.
- In the longer term, youth will be less likely to develop anxiety disorders.

Intended outcomes

Supporting children's mental health and wellbeing
Enhancing school achievement & employment

Contact details

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About the evidence

FRIENDS for Youth's most rigorous evidence comes from an RCT, which was conducted in Ireland. This is a rigorously conducted (level 3) study, which has identified a statistically significant positive impact on a number of child outcomes. A programme receives the same rating as its most robust study, and so FRIENDS for Youth receives a level 3 rating overall.

Study 1

Citation: Rodgers & Dunsmuir (2013)

Design: RCT

Country: Ireland

Sample: 62 children between 12 and 13 years old, recruited from a disadvantaged catchment area

Timing: Post-intervention

Child outcomes:

- Reduced anxiety
 - Reduced anxiety
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Other outcomes:

- None measured
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Study rating: 3

Rodgers, A., & Dunsmuir, S. (2013). A controlled evaluation of the 'FRIENDS for Life' emotional resiliency programme on overall anxiety levels, anxiety subtype levels and school adjustment. *Child and Adolescent Mental Health*, 20(1), 13–19

Available at <http://onlinelibrary.wiley.com/doi/10.1111/camh.12030/abstract>

Study design and sample

This study is a rigorously conducted RCT, with random assignment of pupils to the intervention or to a wait-list control.

The study was conducted in Ireland, with a sample of pupils from three schools located in a disadvantaged catchment area in a major city. The children were between 12 and 13 years of age, and were largely English-speaking and White Irish.

Measures

The study assessed children's anxiety on the Spence Children's Anxiety Scale (SCAS), using the child self-report version and the parent-report version. In addition, the study assessed school adjustment on the child-report and teacher-report versions of the Child Rating Scale (CRS).

Findings

This study identified statistically significant positive impact on a number of child outcomes. At post-test, there were statistically significant differences between the intervention and control groups favouring the intervention group on child- and parent-reported anxiety.

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.

Lock, S., & Barrett, P. M. (2003). A longitudinal study of developmental differences in universal preventive intervention for child anxiety. *Behaviour Change*, 20(4), 183–199 - **This reference refers to a quasi-experimental design, conducted in Australia.**

Barrett, P. M., Farrell, L. J., Ollendick, T. H., & Dadds, M. (2006). Long-term outcomes of an Australian universal prevention trial of anxiety and depression symptoms in children and youth: An evaluation of the Friends program. *Journal of Clinical Child and Adolescent Psychology*, 35(3), 403–411 - **This reference refers to a quasi-experimental design, conducted in Australia.**

Henefer, J., & Rodgers, A. (2013). 'FRIENDS for Life': A school-based positive mental health programme. Research project overview and findings.

Barrett, P. M., Sonderegger, R., & Sonderegger, N. L. (2001). Evaluation of an anxiety-prevention and positive-coping program (FRIENDS) for children and adolescents of non-English-speaking background. *Behaviour Change*, 18(2), 78–91 - **This reference refers to a quasi-experimental design, conducted in Australia.**

Barrett, P. M., Sonderegger, R., & Xenos, S. (2003). Using FRIENDS to combat anxiety and adjustment problems among young migrants to Australia: A national trial. *Clinical Child Psychology and Psychiatry*, 8(2), 241–260 - **This reference refers to a quasi-experimental design, conducted in Australia.**

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.

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