

Positive Action

Review: September 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.

Positive Action is a universal, school-based social and emotional learning programme delivered to children between the ages of 4 and 15.

Sessions for children are taught by curriculum, covering 6 core topics – self-concept, positive actions for body and mind, positive actions for getting along with others, positive actions managing yourself, positive actions for improving yourself continuously, and positive actions for being honest with yourself and others.

Sessions are direct instruction from lesson plans in teacher's manuals which include activities, such as: role-playing, discussion, interactive posters, poems, music, puppets, games, radio plays, journaling, projects, stories, questions & answers, and activity sheets.

Evidence
rating: **3+**

Cost rating: **1**

EIF Programme Assessment

Positive Action 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.

This assessment and the evidence reviewed specifically focuses on the K-8 (kindergarten to grade 8) version of Positive Action – the UK equivalent is reception to year 9. The most robust evidence reviewed here specifically evaluates Positive Action from 3rd to 8th grade (UK year 4 to year 9).

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:

Preventing risky sexual behaviour & teen pregnancy

Reduced sexual activity

Based on study 2

Preventing crime, violence and antisocial behaviour

Reduced serious violence-related behaviours

Based on study 1

36% decrease in serious violence-related behaviours (measured using a researcher-developed survey into number of violence-related behaviours)

Improvement index: **+11**

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 61% and worse outcomes than 39% of their peers, if they had received the intervention.

Immediately after the intervention

Based on study 2

Preventing substance abuse

Reduced lifetime prevalence of substance use

Based on study 1

31% decrease in substance use (measured using a researcher-developed survey into number of substance use behaviours)

Improvement index: **+9**

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 59% and worse outcomes than 41% of their peers, if they had received the intervention.

Immediately after the intervention

Reduced lifetime substance abuse

Based on study 2

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:

- Primary school

The programme may also be delivered in these settings:

- Primary school

How is it targeted?

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

- Universal
-

Where has it been implemented?

Canada, Germany, Netherlands, United Kingdom, United States, Ireland

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?

- Positive Action is delivered by one classroom teacher to classes of children and young people.
- The K-6 curriculum consists of 140 15-minute sessions (35 hours); the grade 7-8 curriculum consists of 82 15-minute sessions (21 hours).
- There is a further grade 9-12 curriculum available, which consists of 132 15-minute sessions (33 hours).

What happens during the intervention?

- Sessions for the entire Pre-K-12 curriculum cover six topics sequentially across all grade levels:
 - Self-concept: Pupils are introduced to the programme and learn its core principles, namely that when you do good things, you feel good about yourself, and so by making positive choices you generate a positive cycle (thoughts lead to actions, actions lead to feelings about yourself and feelings lead to more thoughts).
 - Positive actions for body and mind: Pupils learn about nutrition, exercise and good hygiene and sleep habits; problem-solving, decision-making, study skills, valuing learning, curiosity, memorisation and creativity.
 - Positive actions for getting along with others by treating others in a manner in which you would like to be treated: Pupils learn about empathy, respect, kindness, looking for the good in others, cooperation, and positive communication.
 - Positive actions managing yourself: Pupils learn about exercising self-control and control over their personal resources (time, money, energy, thoughts, actions, feelings, possessions and talents).
 - Positive actions for improving yourself continuously: Pupils learn about goal-setting and how to reach goals by believing in your potential, having courage to try, turning problems into opportunities and being persistent, and broadening your horizons.
 - Positive actions for being honest with both yourself and others: Pupils learn about honesty as well as self-honesty: not blaming others, not making excuses, not rationalising, and doing what you say you will do.
- Sessions are direct instruction from lesson plans in teachers' manuals which include activities, such as: role-playing, discussion, interactive posters, poems, music, puppets, games, radio plays, journaling, projects, stories, questions & answers, and activity sheets.

What are the implementation requirements?

Who can deliver it?

- The practitioner who delivers this programme is a classroom teacher (although counsellors, facilitators or specialists can deliver the programme) with QCF-6 level qualifications.

What are the training requirements?

- Practitioners have half-day to a full-day of programme training. Booster training of practitioners is recommended.
- Training is delivered on-site or live online. Additional training components (ie family and community components) add another half to full day of training.

How are the practitioners supervised?

- It is recommended that practitioners are supervised by one host agency supervisor (qualified to QCF-6 level), with one day 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
- Face-to-face training
- Fidelity monitoring.

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?

- Positive self-concept, self-management/control/regulation skills, problem-solving and decision-making skills, pro-social attitudes and skills, honesty with self and others, goal-setting, planning for the future, and persistence to reach one's goals all protect children and youth from internalising problems (anxiety, depression) and externalising behaviours (disruptive behaviour, violence, substance use). They provide the skills and character necessary for positive development, academic achievement and success in life.
- Positive Action (a) teaches young people positive actions that help youth feel better about themselves and intrinsically motivates them; (b) creates a positive school climate that is supportive of positive behaviours by teachers and students; and (c) engages parents and the broader community in supporting/reinforcing positive behaviours by youth.
- In the short term, youth have measurably better self-concept, self-control, decision making, prosocial attitudes and skills, honesty, and goal-setting skills.
- In the longer term, youth have reduced anxiety and depression, fewer externalising behaviours (disruptive behaviours, violence and substance use), more positive health behaviours (physical activity, nutrition), improved peer-relations and pro-social behaviours, and improved school attendance and academic achievement.

Intended outcomes

Supporting children's mental health and wellbeing Preventing child maltreatment Enhancing school achievement & employment Preventing crime, violence and antisocial behaviour Preventing substance abuse Preventing risky sexual behaviour & teen pregnancy Preventing obesity and promoting healthy physical development

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About the evidence

Positive Action's most rigorous evidence comes from two RCTs which were conducted in the United States.

The first study is a rigorously conducted RCT. This study identified statistically significant positive impact on a number of child outcomes.

The second study is an RCT. This study identified statistically significant positive impact on a number of child outcomes. The conclusions that can be drawn from this study are limited by methodological issues pertaining to a lack of clarity in terms of attrition and differential attrition rates, and analyses of differential attrition demonstrating baseline equivalence of the analysis sample on key outcome variables are not provided, hence why a higher rating is not achieved.

This programme has evidence from at least one rigorously conducted RCT along with evidence from an additional comparison group study. Subsequently, the programme receives a 3+ rating overall.

Study 1

Citation: Li, K.-K., et al. (2011)

Design: Cluster RCT

Country: United States

Sample: A cohort of primary school children between 8 and 9 years old at baseline

Timing: End of grade 5 – intervention has been delivered for approximately 3 years

Child outcomes:

- Reduced serious violence-related behaviours
 - Reduced lifetime prevalence of substance use
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Other outcomes:

- None measured
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Study rating: 3

Li, K.-K., Washburn, I., DuBois, D.L., Vuchinich, S., Ji, P., Brechling, V., Day, J., Beets, M.W., Acock, A.C., Berbaum, M., Snyder, F., Flay, B.R. (2011). Effects of the Positive Action Programme on problem behaviors in elementary school students: A matched-pair randomised control trial in Chicago. *Psychology & Health*, 26(2), 187-204.

Available at <http://www.tandfonline.com/doi/abs/10.1080/08870446.2011.531574>

Study Design and Sample

The first study is a rigorously conducted RCT.

This study involved random assignment of schools, and in particular, a cohort of third graders from within each recruited school, to Positive Action (K-8 classroom curriculum), or to a wait-list group.

This study was conducted in the United States with a sample of Chicago public schools, and within those schools, a cohort of third grade children (approximately 8 years old). The ethnic backgrounds of the children included in the sample were: 46% African-American, 27% Hispanic, 7% White non-Hispanic, 3% Asian, 17% other or mixed.

Measures

On the individual-level:

- Lifetime prevalence of substance use, and use of specific substances, was measured using a standard frequency of use questionnaire (child self-report)
- Serious violence-related behaviour was measured using a 7-item questionnaire (child self-report)
- Disruptive behaviour was measured using the Frequency of Delinquent Behaviour Scale (child self-report).

Findings

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

- Reduced lifetime prevalence of substance use
- Reduced serious violence-related behaviours.

NB: Due to level of attrition at the grade 8 measurement point (Lewis et al. 2012; Bavarian et al. 2013; Lewis et al. 2013(a); Lewis et al. 2016; Bavarian et al. 2016) the results at follow up do not meet the EIF level 3 criteria and so are not reported here. Additionally, due to the small school-level sample size, school-level results are not reported here.

Study 2

Citation: Beets, M. W., et al. (2009)

Design: Cluster RCT

Country: United States

Sample: A cohort of primary school children between 6 and 8 years old at baseline

Timing: End of grade 5/6 – intervention has been delivered for approximately 3 years

Child outcomes:

- Reduced sexual activity
 - Reduced serious violence-related behaviours
 - Reduced lifetime substance abuse
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Other outcomes:

- None measured
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Study rating: 2+

Beets, M. W., Flay, B. R., Vuchinich, S., Snyder, F., Acock, A., Burns, K., Washburn, I. J., & Durlak, J. (2009). Use of a social and character development program to prevent substance use, violent behaviors, and sexual activity among elementary-school students in Hawaii. *American Journal of Public Health*, 99(8), 1-8. Available at <http://ajph.aphapublications.org/doi/abs/10.2105/AJPH.2008.142919>

Study Design and Sample

The second study is an RCT.

This study involved random assignment of schools, and in particular, a cohort of first/second-graders from within each school, to Positive Action (K-5 classroom curriculum), or to a wait-list group.

This study was conducted in the United States with a sample of Hawaii community schools, and within those schools, a cohort of first/second grade children (approximately 6-8 years old). The ethnic backgrounds of the children included in the sample were: 26.1% Hawaiian, 22.6% multiple ethnic backgrounds, 8.6% non-Hispanic White, 1.6% African American, 1.7% American Indian, 4.7% other Pacific Islander, 4.6% Japanese, 20.6% other Asian, 7.8% other, and 1.6% unknown.

Measures

On the individual-level:

- At grade 5/6, lifetime substance abuse was measured using a standard frequency of use questionnaire (child self-report).
- Serious violence-related behaviour was measured using a 7-item questionnaire (child self-report)
- In addition, a teacher-report measure of the extent to which the teacher believed a child engaged in substance use and violent behaviours was used.
- Voluntary sexual activity was measured using child self-report measures of the extent to which they had been engaged in voluntary sexual activity (Beets et al. 2009).

Findings

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

- Reduced lifetime prevalence of substance use
- Reduced child- and teacher-reported serious violence-related behaviours
- Reduced voluntary sexual activity.

NB: Due to the small school-level sample size, the school-level results described in Snyder, F., et al. (2010) and Snyder, F., et al (2011) are not reported here.

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.

Flay, B.R. & Allred, C.G. (2003). Long-term Effects of the Positive Action Program, *American Journal of Health Behavior*, 27 (Supplement 1): S6-S21 - **This reference refers to a quasi-experimental design, conducted in the USA.**

Flay, B.R., Allred, C.G., & Ordway, N. (2001). Effects of the Positive Action Program on Achievement and Discipline: Two Matched-Control Comparisons. *Prevention Science*, S21 - **This reference refers to a quasi-experimental design, conducted in the USA.**

Washburn, I.J., Acock, A., Vuchinich, S., Snyder, F., Li, K.-K., Ji, P., Day, J., DuBois, D.L., & Flay, B.R. Effects of a Social-Emotional and Character Development Program on the Trajectory of Behaviors Associated with Character Development: Findings from Three Randomized Trials. *Prevention Science* (2011) 12:314-323. Published online: July 1, 2011 - **This reference refers to a randomised control trial, conducted in the USA.**

Flay, B. R. (2012). Randomized evaluation of the Positive Action pre-K program. Unpublished - **This reference refers to a randomised control trial, conducted in the USA.**

Schmitt, S.A., Flay, B.R., Lewis, K., (2014). A pilot evaluation of the Positive Action prekindergarten lessons. *Early Child Development and Care*, 2014 2 (2), 71-90. S21 - **This reference refers to a randomised control trial, conducted in the USA.**

Guo, S., Wu, Q., Smokowski, P. R., Bacallao, M., Evans, C. B. R., & Cotter, K. L. (2015). A longitudinal evaluation of the Positive Action Program in a low-income, racially diverse, rural county: Effects on self-esteem, school hassles, aggression, and internalizing symptoms. *Journal of Youth and Adolescence*, 44, 2337-2358 - **This reference refers to a quasi-experimental design, conducted in the USA.**

Smokowski, P. R., Guo, S., Wu, Q., Evans, C. B. R., Cotter, K. L., & Bacallao, M. (2016). Evaluating dosage effects for the Positive Action Program: How implementation impacts internalizing symptoms, aggression, school hassles, and self-esteem. *American Journal of Orthopsychiatry*. Advance online publication, <http://dx.doi.org/10.1037/ort0000167> - **This reference refers to a randomised control trial, conducted in the USA.**

Flay, B. & Slagel, M. (2006). The Positive Action family program: A pilot randomized trial. Unpublished manuscript - **This reference refers to a randomised control trial, conducted in the USA.**

Flay, B. (2010). The Positive Action family program: a pilot randomized trial and replication.

Unpublished Report, Oregon State University." S21 - **This reference refers to a randomised control trial, conducted in the USA.**

Oakes, W.P., Lane, K.L., Cox, M., Magrane, A., Jenkins, A., Hankins, K. (2012). Tier 2 Supports to Improve Motivation and Performance of Elementary Students with Behavioral Challenges and Poor Work Completion. *Education and Treatment of Children*, Vol. 35, No. 4, 547-584 - **This reference refers to a randomised control trial, conducted in the USA.**

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.

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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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