

Last reviewed: March 2017

Intervention website: <https://friendsresilience.org/>

GUIDEBOOK INTERVENTION INFORMATION SHEET

Fun FRIENDS

Please note that in the ‘Intervention Summary’ table below ‘child age’, ‘level of need’, and ‘race and ethnicities information is **as evaluated in studies**. Information in other fields describes the intervention as **offered/supported by the intervention provider**.

Intervention summary	
Description	Fun FRIENDS is a school-based, universal preventative intervention for children aged between 4 and 7 years. It is delivered by psychologists, teachers, or allied health professionals and can be delivered across a flexible number and duration of sessions, provided the content is covered in the recommended order. The intervention aims to improve resilience skills in children, reduce anxiety, and improve mental health and wellbeing.
Evidence rating	2
Cost rating	1
Child outcomes	<ul style="list-style-type: none"> Supporting children’s mental health and wellbeing <ul style="list-style-type: none"> Improved social & emotional development. Improved social behaviour. Increased protective factors.
Child age (population characteristic)	4 to 7 years
Level of need (population characteristic)	Universal

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Intervention summary	
Race and ethnicities (population characteristic)	White
Type (model characteristic)	Group
Setting (model characteristic)	Primary school
Workforce (model characteristic)	<ul style="list-style-type: none">• Psychologist• Teacher• Allied health professional
UK available?	Yes
UK tested?	No

Model description

Fun FRIENDS is a school-based, universal preventative intervention for children aged between 4 and 7 years. The intervention aims to improve resilience skills in children, reduce anxiety, and improve mental health and wellbeing.

Fun FRIENDS is delivered by psychologists, teachers, or allied health professionals and can be delivered across a flexible number and duration of sessions, provided the content is covered in the recommended order, outlined below. In the studies evaluated, Fun FRIENDS was delivered by teachers to groups of children in the classroom across 9 to 10 weekly sessions of one hour's duration, with two additional booster sessions provided in one study.

Fun FRIENDS uses a play-based approach incorporating stories, games, videos, and activities to teach children developmentally appropriate cognitive-behavioural strategies to promote resilience and social and emotional skills from an early age. Fun FRIENDS uses a combination of relaxation, cognitive restructuring, attention training, graded exposure to anxiety-provoking situations, and problem solving, alongside additional parent information sessions and the involvement of families and teachers to reinforce intervention content.

The FRIENDS name is an acronym of session content, which begins with developing a sense of identity, group cohesion, and acceptance, followed by a focus on **F**eelings, including identifying

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emotions and helpful and unhelpful coping behaviours; **Remember** to relax, including identifying physiological manifestations of anxiety and learning relaxation strategies; **I can try my best!** in which children learn about helpful and unhelpful self-talk, strategies for changing unhelpful self-talk to helpful and to use the helpful self-talk to achieve goals; **Encourage**, involving children breaking down tasks and using positive self-talk to try new things; **Nurture**, when children are introduced to the concept of role models and support teams; **Don't forget** to be brave, including further discussion of support teams and planning ahead for difficult situations; and **Stay smiling**, in which children dress up as a favourite brave person and celebrate completing the intervention.

Target population

Age of child	4 to 7 years
Target population	<ul style="list-style-type: none">• Children aged between 4 and 7 years• The intervention can also be used in a targeted fashion for children showing signs of anxiety or low mood

Please note that the information in this section on target population is as **offered/supported by the intervention provider**.



Theory of change

Why		Who	How	What		
Science-based assumption	Science-based assumption	Science-based assumption	Intervention	Short-term outcomes	Medium-term outcomes	Long-term outcomes
Stressful and uncomfortable situations can lead to stress and anxiety in children.	Coping skills increase a child's resilience and protects children from developing anxiety.	Children aged between 4 to 7 years	Children learn coping skills such as understanding and managing emotions to better respond to uncomfortable emotions in appropriate and helpful ways.	Improved awareness of their emotions.	<ul style="list-style-type: none"> • Increased helpful emotion management techniques • Improved coping with stressful or uncomfortable situations. 	Reduced likelihood of developing anxiety disorders.



Implementation requirements

Who is eligible?	Children aged 4 to 7 years.
How is it delivered?	Fun FRIENDS is delivered in a variable number of sessions, for example five sessions of 2 to 2.5 hours' duration each or 10 sessions of 1 to 1.5 hour's duration each by one practitioner, to groups of children in the classroom.
What happens during the intervention?	<p>The practitioner uses a play-based approach incorporating stories, games, videos, and activities to teach children developmentally appropriate cognitive-behavioural strategies, following the content order set out by the providers.</p> <p>The aim of the intervention is to promote resilience and social and emotional skills from an early age.</p>
Who can deliver it?	The practitioner who delivers this intervention is a psychologist, teacher, or allied health professional.
What are the training requirements?	The practitioners have eight hours of intervention training. Booster training of practitioners is recommended.
How are practitioners supervised?	Supervision of practitioners is not required.
What are the systems for maintaining fidelity?	<p>Intervention fidelity is maintained through the following processes:</p> <ul style="list-style-type: none"> • Training manual • Other online material • Face-to-face training • Facilitator manual.
Is there a licensing requirement?	Yes
*Contact details	<p>Contact person: Casey Dick</p> <p>Email address: licensing@friendsresilience.org</p> <p>Website: https://friendsresilience.org/</p> <p>*Please note that this information may not be up to date. In this case, please visit the listed intervention website for up to date contact details.</p>



Evidence summary

The most rigorous evidence for Fun FRIENDS comes from two cluster RCTs which were conducted in Australia. It has preliminary evidence of improving a child outcome, but we cannot be confident that the intervention caused the improvement.

These studies identified statistically significant reductions in behavioural inhibition and improvements in social-emotional strength, protective factors, and behaviour and emotional functioning consistent with our Level 2 threshold.

Search and review

	Number of studies
Identified in search	2
Studies reviewed	2
Meeting the L2 threshold	2
Meeting the L3 threshold	0
Contributing to the L4 threshold	0
Ineligible	0

Individual study summary: Study 1

Study 1	
Study design	Cluster RCT
Country	Australia
Sample characteristics	263 preschool children (mean age = 4.56) attending one of nine preschools in Brisbane, Australia



Study 1	
Race, ethnicities, and nationalities	Not stated
Population risk factors	None reported
Timing	Baseline and post-intervention
Child outcomes	<ul style="list-style-type: none"> • Reduced behavioural inhibition (teacher report) • Increased social-emotional strength (teacher report).
Other outcomes	None
Study Rating	2
Citation	Pahl, K. M., & Barrett, P. M. (2010) Preventing anxiety and promoting social and emotional strength in preschool children: A universal evaluation of the Fun FRIENDS program. <i>Advances in School Mental Health Promotion</i> . 3 (3), 14–25.

Brief summary

Population characteristics

This study involved a sample of 263 preschool students (137 male, 126 female) attending one of 16 classes across nine preschools in Brisbane, Australia. Approximately 19% of the sample had an annual income under \$40,000, with 38.7% between \$40,001 and \$80,000, and 28% between \$80,001 and \$100,000 and over.

Study design

Classes were matched on socioeconomic status, class size, and gender composition and randomly assigned to the intervention group or the wait-list control group by an independent research student, resulting in 134 children in the intervention group and 129 children in the wait-list control group. Children in the intervention group scored significantly higher than children in the wait-list control group on the teacher-rated Behavioural Inhibition Questionnaire at baseline. All other baseline characteristics were the same for both groups.

The wait-list control group received the normal curriculum.



Measurement

Assessments of both the intervention and control groups took place at baseline (pre-intervention) and post-intervention, and the intervention group was also assessed at 12-month follow-up. Pre- and post-intervention assessments included both teacher and parent report; follow-up assessments included intervention group parent report measures only.

- **Parent report** measures included the Preschool Anxiety Scale (PAS), the Behavioural and Emotional Rating Scale (BERS), the Behavioural Inhibition Questionnaire (BIQ), and the Behavior Intervention Rating Scale (BIRS).
- **Teacher report** measures included the Behavioural and Emotional Rating Scale (BERS), the Behavioural Inhibition Questionnaire (BIQ), and the Behavior Intervention Rating Scale (BIRS).
- **Group facilitator** measures included a weekly treatment integrity checklist.

Study retention

Pre-intervention

- 6.5% of data was missing from all parent report child outcome measures.
- <2% of data was missing from teacher report measures.
- Expectation maximisation was used to replace missing data at this timepoint only.

Post-intervention

- 41% of data was missing from all parent report child outcome measures.
- <2% of data was missing from all teacher report child outcome measures. Participants' scores from pre-intervention were used at post-intervention for post-intervention teacher report measures only.

12-month follow-up

- 43–44% of data was missing from parent report child outcome measures at follow-up.

Results

Data-analytic strategy

Mixed between-within subjects ANOVAs were used to assess the impact of intervention over time, with time as the within-subject factor and intervention condition and gender as between-subjects factors.

One-way repeated-measures ANOVAs were conducted for intervention group parent report measures to assess the 12-month follow-up results.

Findings

At post-intervention, no significant effect of intervention was observed on parent outcome measures. Children in the intervention group had a significantly greater teacher-reported decrease in behavioural inhibition compared to the control group as measured by the BIQ; however, at pre-intervention there were significant baseline differences in this measure, with children in the



intervention group scoring significantly higher. Children in the intervention group showed significant increases in emotional strength compared to the wait-list control, as measured by the teacher report BERST.

There was a significant reduction in parent-reported child anxiety from pre-intervention to 12-month follow-up; there were, however, high levels of attrition in the parent report sample.

Study 1: Outcomes table

Outcome	Measure	Effect size	Statistical significance	Number of participants	Measurement time point
Child outcomes					
Child anxiety	Preschool Anxiety Scale (PAS) (parent report)	Not reported	No	155	Post-intervention
Social-emotional strength	Behavioral and Emotional Rating Scale (BERS) (parent report)	Not reported	No	155	Post-intervention
Social-emotional strength	Behavioral and Emotional Rating Scale (BERS) (teacher report)	Not reported	Yes	263	Post-intervention
Behavioural Inhibition	Behavioral Inhibition Questionnaire (BIQ) (parent report)	Not reported	No	155	Post-intervention
Behavioural Inhibition	Behavioral Inhibition Questionnaire (BIQ) (teacher report)	Not reported	Yes	263	Post-intervention



Individual study summary: Study 2

Study 2	
Study design	Cluster RCT
Country	Australia
Sample characteristics	488 Children aged 4 to 7 years attending one of 14 Catholic Education schools in Brisbane, Australia
Race, ethnicities, and nationalities	White
Population risk factors	None reported
Timing	<ul style="list-style-type: none"> • Baseline • Post-intervention • 12-month follow-up.
Child outcomes	<ul style="list-style-type: none"> • Improved behaviour and emotional functioning (parent report) • Reduced behavioural inhibition (parent report) • Increased protective factors (teacher report).
Other outcomes	None reported
Study Rating	2
Citation	Anticich, S. A., Barrett, P. M., Silverman, W., Lacherez, P. & Gillies, R. (2013) The prevention of childhood anxiety and promotion of resilience among preschool-aged children: A universal school based trial. <i>Advances in School Mental Health Promotion</i> . 6 (2), 93–121.

Brief summary

Population characteristics

This study involved a sample of 488 children (271 females, 217 males) aged between 4 and 7 years, attending 14 Catholic schools in Brisbane, Australia. 76.5% of the sample reported an annual family income above AUS \$60,000, and the socioeconomic status of the schools ranged from 1033 to 1200 based on the Index of Community Socio-Educational Advantage (mean=1000, SD = 100).



Study design

14 participating schools were matched on socioeconomic status and randomly assigned to the intervention group, an active control group or a wait-list control group. This resulted in 159 children (95 females, 64 males) in the intervention group, 196 children (101 females, 95 males) in the active control group and 133 children (75 females, 58 males) in the wait-list control group.

The active control group received a CBT-based social and emotional skills intervention, 'You Can Do It'. You Can Do It is a universal teacher-led intervention delivered over 10 weeks. You Can Do It does not include any specific implementation training for teachers.

The wait-list control group received the standard curriculum for the 12-month wait period, with clinical psychologists available for consultation during this time. After the wait period all schools were offered the Fun FRIENDS intervention.

All parents were invited to an initial parent information evening, and parents in the intervention group and the active control group received an additional intervention-specific information session.

Baseline characteristics differed between groups on factors 1 (behavioural and emotional functioning), 2 (behavioural difficulties), and 3 (inhibition) of the exploratory factor analysis, with the wait-list group scoring significantly higher than the intervention and active control groups in factor 1, and scoring significantly higher than the intervention group for factor 2. For factor 3, the wait-list group scored significantly lower than both the intervention and active control groups and the active control group scored significantly higher than the intervention group. Baseline scores were corrected for in the follow-up analyses.

Measurement

Assessments took place at baseline (pre-intervention), post-intervention, and 12-month follow-up.

Child outcomes

- **Parent report** measures included the Preschool Anxiety Scale (PAS), the Behavioural Inhibition Questionnaire (BIQ), the Behavioural and Emotional Rating Scale, second edition (BERS-2), the Strengths and Difficulties Questionnaire (SDQ), and the Devereux Early Childhood Assessment Clinical Form (DECA-C).
- **Teacher report** measures included the DECA-C Teacher Report.

Parent outcomes

- **Parent report** measures included the Depression, Anxiety and Stress Scale (DASS-21), the Hospital Anxiety and Depression Scale (HADS), and the Parenting Stress Index, Short Form (PSI-SF).

Study retention

Study retention is unclear. 200 of the 488 children were missing at least one observation, and 15 were missing more than 30% of their data and were removed.

Results



Data-analytic strategy

Exploratory factor analysis was conducted on all parent–child outcome measures, resulting in the identification of four factors; behavioural and emotional functioning (factor 1), behavioural difficulties (factor 2), inhibition (factor 3), and parenting stress (factor 4), and a two-way linear mixed effects model was conducted to identify interaction effects.

In addition, a two-way linear mixed-effects model was conducted on the Protective Factors Scale from the teacher reported DECA measure.

Findings

Controlling for baseline differences, the Fun FRIENDS group had significantly greater improvements in behavioural and emotional functioning than either the active control or wait-list control group at both post-test and 12-month follow-up. The Fun FRIENDS group had significantly greater reductions in behavioural difficulties than the wait-list control group, but not the active control group, at post-test. At 12-month follow-up, the Fun FRIENDS group had significantly greater reductions than the active control group but not the wait-list control group. The Fun FRIENDS group also had significantly greater reductions in behavioural inhibition than the wait-list control group at 12-month follow-up, and significantly greater reductions than both the wait-list and active control group at 12-month follow-up.

Controlling for baseline differences, the Fun FRIENDS group had significantly greater improvements in protective factors than both the active and wait-list controls, at post-intervention, and at 12-month follow-up.

Study 2: Outcomes table

Outcome	Measure	Effect size	Statistical significance	Number of participants	Measurement time point
Child outcomes					
Behavioural and emotional functioning	Factor 1: Behavioural and Emotional Rating Scale, second edition (BERS-2); subscales interpersonal strengths, family involvement, intrapersonal strength, school functioning, and affective strength (parent report)		Yes	473	Post-intervention



Outcome	Measure	Effect size	Statistical significance	Number of participants	Measurement time point
Behavioural and emotional functioning	Factor 1: Behavioural and Emotional Rating Scale, second edition (BERS-2); subscales interpersonal strengths, family involvement, intrapersonal strength, school functioning, and affective strength (parent report)		Yes	473	12-month follow-up
Behavioural difficulties	Factor 2: Strengths and Difficulties Questionnaire subscales conduct problems, prosocial behaviour, hyperactivity, and peer difficulties (parent report) and Devereux Early Childhood Assessment Clinical Form subscales withdrawal/depression, initiative, total protective factors, emotional control problems, and self-control		Yes	469	Post-intervention



Outcome	Measure	Effect size	Statistical significance	Number of participants	Measurement time point
Behavioural difficulties	Factor 2: Strengths and Difficulties Questionnaire (SDQ) subscales conduct problems, prosocial behaviour, hyperactivity, and peer difficulties (parent report) and Devereux Early Childhood Assessment Clinical Form (DECA-C) subscales withdrawal/depression, initiative, total protective factors, emotional control problems, and self-control (parent report)		No	469	12-month follow-up
Behavioural Inhibition	Factor 3: Preschool Anxiety Scale (PAS) social anxiety subscale (parent report), Behavioural Inhibition Questionnaire (BIQ) subscales physical challenge, performance situations, unfamiliar adults, and general novel situations (parent report)		Yes	473	Post-intervention



Outcome	Measure	Effect size	Statistical significance	Number of participants	Measurement time point
Behavioural Inhibition	Factor 3: Preschool Anxiety Scale (PAS) social anxiety subscale (parent report), Behavioural Inhibition Questionnaire (BIQ) subscales physical challenge, performance situations, unfamiliar adults, and general novel situations (parent report)		Yes	473	12-month follow-up
Child protective factors	Devereux Early Childhood Assessment Clinical Form (DECA-C) Total Protective Factors subscale (teacher rating)		Yes	31	Post-intervention
Child protective factors	Devereux Early Childhood Assessment Clinical Form (DECA-C) Total Protective Factors subscale (teacher rating)		Yes	31	12-month follow-up
Child behavioural concerns	Devereux Early Childhood Assessment Clinical Form (DECA-C) Total Behavioural Concerns subscale (teacher rating)		Not reported	31	Post-intervention
Child behavioural concerns	Devereux Early Childhood Assessment Clinical Form (DECA-C) Total Behavioural Concerns subscale (teacher rating)		Not reported	31	12-month follow-up



Outcome	Measure	Effect size	Statistical significance	Number of participants	Measurement time point
Parent outcomes					
Parenting Stress	Factor 4: Parenting Stress Index, Short Form (PSI-SF) subscales father defensive responding, father parental distress, mother defensive responding, mother parental distress, father parental child dysfunction, father difficult child		No	Unclear (488)	Post-intervention
Parenting Stress	Factor 4: Parenting Stress Index, Short Form (PSI-SF) subscales father defensive responding, father parental distress, mother defensive responding, mother parental distress, father parental child dysfunction, father difficult child		No	Unclear (488)	12-month follow-up

Other studies

No other studies were identified for this intervention.

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Note on provider involvement: This provider has agreed to Foundations' terms of reference (or the Early Intervention Foundation's terms of reference), and the assessment has been conducted and published with the full cooperation of the intervention provider.