Foundations Guidebook - Intervention information sheet

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Intervention website: www.uwl.ac.uk/pyramid

GUIDEBOOK INTERVENTION INFORMATION SHEET

Pyramid Club Secondary

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	Pyramid Club Secondary is a targeted schools-based intervention for young people aged 11 to 14 years old who are identified as being quiet, shy, and behaviourally more likely to internalise. It is delivered by trained leaders to classrooms of up to 12 young people, for a period of 10 weeks.				
Evidence rating	2				
Cost rating	1				
Child outcomes	 Supporting children's mental health and wellbeing Improved emotional wellbeing Improved social behaviour. 				
Child age (population characteristic)	11 to 14 years old				
Level of need (population characteristic)	Targeted Indicated				

Intervention sum	nary
Race and ethnicities (population characteristic)	 Asian Indian Asian Other Asian Pakistani Black African Black Caribbean White and Asian White and Black African White British White Other.
Type (model characteristic)	Group
Setting (model characteristic)	Secondary school
Workforce (model characteristic)	Trained leaders such as school or voluntary organisation staff members or volunteers
UK available?	Yes
UK tested?	Yes

Model description

Pyramid Clubs are specialised interventions aimed at supporting children who are shy, quiet, withdrawn, or experiencing anxiety in school or home environments. There are three variations of the intervention, each designed for a different age group or stage of development: Pyramid Club (Primary), Pyramid Club (Secondary), and Pyramid Club (Transition). We have evaluated each of these versions separately to account for their distinct target populations and implementation.

Pyramid Club (Secondary) is a targeted school-based intervention for children aged 11 to 14 years old aimed at improving socio-emotional competencies in shy or anxious young people. Activities include circle time, arts and crafts, games, and snack time, designed to boost social skills, self-esteem, and emotional regulation.

Pyramid Clubs incorporate circle time for group discussions, creative art and craft activities, teambased games fostering collaboration, and food preparation to build practical skills, celebrate cultural diversity, and understand individual preferences.

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Target population

Age of child	11 to 14 years old
Target population	Secondary school children considered shy or quiet and prone to internalising problems.

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

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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
 Internalising symptoms (e.g. shyness, sensitivity, and social withdrawal) in childhood are predictors of future psychological issues such as anxiety and depression Children with internalising problems are also more likely to experience long-term negative life outcomes such as poor school achievement, relationship difficulties, and job instability. 	Strong socio- emotional competences will enable children and young people to achieve their full potential in school and in life.	Children aged 11 to 14 at risk of internalising problems (shyness, social withdrawal, emotional vulnerability).	Pyramid clubs allow children to observe and practise coping skills, and encourage effective social interaction with both peers and adults, developing increased socio- emotional competence.	Improved emotional self-management, competence and coping strategies.	Reduction in internalising symptoms (shyness, social withdrawal, emotional difficulties) Enhanced peer relationships and social interactions Increased confidence and resilience Better school engagement and academic performance	Reduced likelihood of mental health problems Reduced failure in school Reduced likelihood of job instability.



Implementation requirements

Who is eligible?	Children in the early stages of secondary school (aged 11 to 14 years old) who are considered shy or quiet and prone to internalising problems.				
How is it delivered?	Pyramid Club (Secondary) is delivered in 10 sessions of 1.5 hours' duration each by three practitioners, to groups of eight to 12 young people.				
What happens during the intervention?	Pyramid Clubs begin and end with circle time. Circle time takes the form of collaborative group discussions which give children the opportunity to listen and speak. Clubs involve art and craft, which provides the opportunity to be creative. Games are played, which are typically team-based and promote negotiation and collaboration. Food preparation and sharing is also a core activity, which provides opportunities to develop skills, acknowledge different cultures, and understand people's likes and dislikes.				
Who can deliver it?	The practitioner who delivers this intervention is a trained school or voluntary organisation staff member or volunteer.				
What are the training requirements?	School or voluntary organisation staff have 10 hours of intervention training, and volunteers have 15 hours of intervention training. Booster training of practitioners is recommended.				
How are practitioners supervised?	It is recommended that practitioners are supervised by one external supervisor, with six hours of intervention training.				
What are the systems for maintaining fidelity?	Intervention 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				



Implementation requirements (Cont.)

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	*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.

Evidence summary

Pyramid Club Secondary's most rigorous evidence comes from one quasi-experimental design study conducted in the United Kingdom, consistent with Foundations' Level 2 evidence strength threshold.

This study identified statistically significant reductions in emotional symptoms, total difficulties, peer relationship problems, and statistically significant improvements in prosocial behaviour.

Pyramid Club Secondary has preliminary evidence of improving a child outcome, but we cannot be confident that the intervention caused the improvement.

Search and review

	Number of studies
Identified in search	2
Studies reviewed	2
Meeting the L2 threshold	1
Meeting the L3 threshold	О
Contributing to the L4 threshold	О
Ineligible	1



Individual study summary: Study 1

Study 1				
Study design	QED (Quasi Experimental Design)			
Country	United Kingdom			
Sample characteristics	The study involved 66 pupils aged 11 to 14 years old from eight coeducational secondary schools in England and Wales.			
Race, ethnicities, and nationalities	 Asian Indian Asian Other Asian Pakistani Black African Black Caribbean White & Asian White and Black African White and Black Caribbean White British White Other. 			
Population risk factors	The participants were selected based on socio-emotional needs, specifically targeting shy, withdrawn, or anxious students			
Timing	 Baseline Post-intervention 12 months post-intervention. 			
Child outcomes	 Reduced total difficulties (child and teacher report) Reduced peer relationship problems (child and teacher report) Reduced emotional symptoms (child and teacher report) Improved prosocial behaviour (teacher report). 			
Other outcomes	None			
Study Rating	2			
Citation	Jayman, M., Ohl, M., Hughes, B. & Fox, P. (2018) Improving socioemotional health for pupils in early secondary education with Pyramid: A school-based, early intervention model. <i>British Journal of Educational Psychology</i> . 89 (1), 111–130.			

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Brief summary

Population characteristics

This study involved 66 pupils aged 11 to 14 years old, with a mix of genders from eight coeducational secondary schools in England and Wales. Participants were selected based on socioemotional needs, specifically targeting shy, withdrawn, or anxious students. Students with high externalising behaviour or comorbidities were excluded from participating.

Study design

66 pupils were assigned to a treatment group and 60 to a comparison group. However, due to significant baseline differences between the Pyramid Club and the comparison group, direct comparisons between them will not provide accurate estimates of the effectiveness of the intervention. Therefore, the comparison group was excluded from our assessment.

Pre-post analysis of 66 participants in the Pyramid Club group provides evidence of improvement, which is sufficient for a Level 2 rating.

Measurement

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

- **Child report** measures included the Strengths and Difficulties Questionnaire (SDQ)
- **Teacher report** measures included the Strengths and Difficulties Questionnaire (SDQ).

Study retention

100% (66) of pupils participated in post-intervention assessment. At 12 months post-intervention, 93% of pupils completed assessments.

Results

Data-analytic strategy

Mixed-model ANOVAs were used to estimate the intervention's effects on the intended outcomes. Participants with missing scores at post-intervention or 12 months post-intervention were excluded from the final analysis.

Findings

Youth in the intervention group showed statistically significant reductions in emotional symptoms, total difficulties, peer relationship problems, and prosocial behaviour at post-intervention and at 12 months post-intervention.



Study 1: Outcomes table

Outcome	Measure	Effect size	Statistical significance	Number of participants	Measurement time point
		Child or	utcomes		
Emotional symptoms	Strengths and Difficulties Questionnaire (Child report)	Not reported	Yes	61	Post-intervention
Emotional symptoms	Strengths and Difficulties Questionnaire (Teacher report)	d = 0.79	Yes	66	Post-intervention
Emotional symptoms	Strengths and Difficulties Questionnaire	d = 0.80	Yes	61	12-months post- intervention
Total difficulties	Strengths and Difficulties Questionnaire (child report)	Dd = 0.41	Yes	66	Post-intervention
Total difficulties	Strengths and Difficulties Questionnaire (Teacher report)	d = 0.96	Yes	66	Post-intervention
Total difficulties	Strengths and Difficulties Questionnaire (Teacher report)	d = 1.02	Yes	61	12-months post- intervention
Peer relationship problems	Strengths and Difficulties Questionnaire (Child report)	Not reported	Yes	66	Post-intervention



Outcome	Measure	Effect size	Statistical significance	Number of participants	Measurement time point
Peer relationship problems	Strengths and Difficulties Questionnaire (Teacher report)	d = 0.82	Yes	66	Post-intervention
Peer relationship problems	Strengths and Difficulties Questionnaire (teacher report)	d = 0.90	Yes	61	12-months post- intervention
Prosocial behaviour	Strengths and Difficulties Questionnaire (Teacher report)	Not reported	Yes	66	Post-intervention
Prosocial behaviour	Strengths and Difficulties Questionnaire (Teacher report)	Not reported	No	61	12-months post- intervention

Other studies

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

Jayman, M., Ohl, M., Hughes, B. & Fox, P. (2014) *Improving the socio-emotional health of young people in early secondary education: Preliminary findings from a study of the Pyramid intervention project*. In Health & Mental Resilience: An Interdisciplinary Approach, 26-27 Sep 2014, Krakow, Poland. (Unpublished)

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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.