



Practice Recommendations for Skill-building Interventions

Skill-building interventions teach youth skills to manage social interactions and control executive responses such as anger and impulsivity. Skills may be interpersonal skills, problem solving skills, mindfulness strategies for managing emotions, stress, and improving focus, and other similar skills.

Examples of Skill-building Interventions

- Interpersonal or social skills training
- Conflict management or resolution training
- Anger management training
- Assertiveness training
- Social problem-solving training
- Executive functioning skills training
- Perspective taking and emotional awareness training
- Mindfulness and relaxation skills training

Our recommendations are specific to the outcomes that your program is targeting. Below, we present our recommendations for **reducing externalizing behaviors, improving social competence, and improving self-regulation**.

Is your program focused on reducing externalizing behaviors?

Externalizing behaviors are maladaptive behaviors directed toward others or one's environment. Examples include fighting, threatening others, bullying, disruptiveness, breaking rules at school or at home, and temper tantrums.



Have “specialized” staff deliver your program

Skill-building interventions **delivered by specialists** such as school psychologists, social workers, or trained youth prevention specialists, showed greater reductions in participants' externalizing behavior than those taught by other personnel, including volunteers, teachers, researchers, and law enforcement officers.



Teach from dedicated lesson plans

Skill-building interventions that **used manuals and dedicated lesson plans** showed greater reductions in participants' externalizing behavior than those that were not manualized.



Emphasize conflict resolution skills

Skill-building interventions that included **conflict resolution skills content** showed greater reductions in youth externalizing than those that did not include this content.

Is your program focused on improving social competence?

Social competence refers to the social skills and social adjustment necessary to successfully navigate interpersonal relationships and one's social environment. Examples include cooperation, assertive communication, helping others, social awareness, peer acceptance, adaptability, and a sense of belonging.



Consider providing programming within a school setting

Skill-building interventions **delivered in a school setting** showed greater improvements in social competence than those provided in community-based settings.



Increase frequency of skill-building sessions

Skill-building interventions that met **more than once per week** showed greater improvements in social competence than those that met less frequently.



Provide opportunities for youth to learn and practice interpersonal skills

Skill-building interventions that included **interpersonal skills content** showed greater improvements in social competence than those that did not include this content. Interpersonal skills include communication skills, peer group interactions, prosocial behavior, conflict resolution and collaborative problem-solving, and understanding feelings and emotions.

Is your program focused on improving self-regulation?

Self-regulation is an individual's ability to manage one's emotions and behavior in accordance with the needs of the situation. Examples include the ability to calm oneself when upset, to pay attention and persist on a task, control impulses, "switch gears" in response to changing demands, and engage in planning, prioritizing, and juggling multiple tasks toward a goal.



Universal Skill-Building Interventions

- Do you provide services to all children and youth in your setting?
- Is your program focused on preventing problems before they start?

1A

Provide services in the community or school pull-out sessions

Universal skill-building interventions that were **delivered in community or school resource room settings** showed greater improvements in self-regulation than those that were delivered in classrooms.

2A

Provide opportunities for youth to learn problem-solving skills

Universal skill-building interventions that **teach the problem-solving sequence** showed greater improvements in participants' self-regulation than those that did not teach problem-solving skills.



Targeted Skill-Building Interventions

- Do you provide services to small groups or pull students out of class for your program?
- Does your program focus on youth referred or nominated for challenging behavior?
- Is your program focused on mitigating problems or preventing further problems?

1B

Carefully assess how well your program fits your context

Targeted skill-building interventions that were **modified by the study authors or that had more flexible manuals or curricula** showed greater improvements in participants' self-regulation than those delivered as the curriculum was intended.

2B

Emphasize relaxation skills

Targeted skill-building interventions that included **relaxation skills content** showed greater improvements in self-regulation than those that did not include this content.

3B

Provide opportunities for youth to learn and practice self-regulation skills

Targeted skill-building interventions that included **modeling of skills or opportunities to practice skills** showed greater improvements in self-regulation than those that did not include this content.

Evidence for Program Improvement was established by The Assistant Secretary for Planning and Evaluation (ASPE) to develop evidence-based practice guidelines for youth programs using a core components approach. Our goal is to better understand the characteristics of effective programs for youth and share guidelines about how to make those programs more effective with those who design, support, and implement them.

Visit our website (<https://youth.gov/epi>) to learn more about the core components approach and to view our practice recommendations.

This document was prepared by Abt Associates under contract number HHSP233201500069I Order No. HHSP23337013T from the U.S. Department of Health and Human Services, Office of the Assistant Secretary for Planning and Evaluation. Any statements expressed are those of the authors and do not necessarily reflect the views of the Office of the Assistant Secretary for Planning and Evaluation, or the U.S. Department of Health and Human Services.

