

Programs aimed at both child and parent work best to reduce behaviour problems and peer rejection

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The Bottom Line:

The causes of childhood behavior problems are complex. A parenting style that uses force instead of reason and encouragement contributes to the development of the behavior problems. The parents, however, are often under extreme stress because of relationship and environmental difficulties (e.g., poor housing, not enough money for food) that may contribute to their critical parenting style.

Two programs aimed at both the child and the parent, the Making Choices program and the Strong Families program, have been shown to reduce childhood aggression and the peer rejection that often results. It is not known which of the components – the child training or the parent training – is the most effective. It may be that both are necessary.

What problem is being addressed?

Children who are aggressive, mean, or defiant often end up being involved in violence and drugs when they become teenagers. During childhood they are often rejected by their peers. Most of these children have not learned how to solve problems by reasoning or understanding another person's perspective. Their families often use physical or verbal threats to get the child to do what they're told, rather than positive discipline that helps the child learn to control his/her own feelings or behaviour.

As a result, these children may become even more disobedient, angry and stubborn, creating a vicious circle of child misbehaviour and parental anger. Their families usually have serious social problems, like living in substandard housing or being unable to afford sufficient food, that add to their stress.

What intervention is being tested?

Interventions directed solely at children can fail if their parents do not also receive help to change the way they behave. Instead of working with only the children or the parents, the Making Choices and the Strong Families programs have components of both.

They help children learn better ways of getting along with others, control their own behaviour, deal with their own feelings, understand other people's intentions, and make academic gains. Classroom environments and coursework are altered to help children

learn the new skills, attitudes, and behaviour. Children with good social skills are also recruited to take part in an after-school program, where they serve as models for positive behaviours like working with others and how to make and keep friends. The parents of the “problem children” were taught positive parenting skills, but only after being given help with housing, food, medical and other social needs, to reduce the families’ stress.

What is the *real scientific evidence*?

This was a randomized controlled trial of the Making Choices and Strong Families programs that took place in North Carolina. 115 children ranging in aged from 6 to 12 and their families were randomly assigned to one or the other of the programs (62 children) or to a waiting list (53 children). In the course of the study 7 treatment and 4 control children dropped out of the study and information was incomplete for another 18 children at the end of the study.

Overall, the study found that children in the intervention group made very good gains in getting along with others, being friendly to other children and playing with them cooperatively, controlling their tempers and being able to calm themselves and otherwise behave appropriately. Their ability to concentrate in school, work hard, stay on task, and complete their assignments also improved. They were also less likely to be mean to other children and were less likely to be rejected by their peers. However, there was less improvement in their ability to accept authority.

It was hard to separate out whether or not it was the interventions with the children or the interventions with their parents that made the most difference. It may be that both are necessary to create the improvements seen in the children.

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The preceding is a summary of:

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