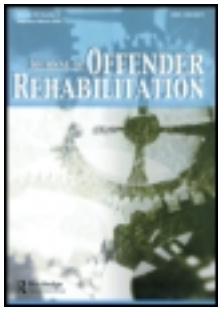

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Anger and Aggression Management Techniques through the Think First Curriculum

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□ Focus on: AGGRESSION — CLINICAL PROCESSES

Anger and Aggression Management Techniques through the *Think First* Curriculum

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ABSTRACT An anger-aggression management curriculum utilizing cognitive-behavioral principles and techniques was evaluated for its effects on a classroom of urban, at risk middle school students. The 10-session curriculum was taught over a 5-week period to a racially integrated classroom of 22 males and females. Heavy use of video symbolic modeling was integrated with techniques of self-instruction, problem solving and self-monitoring. Significant differences between treatment and placebo-contol groups were noted at follow-up in numbers of misconduct referrals. Results are discussed in terms of the use of school-based curriculum in the prevention and intervention of juvenile delinquency.

Although they comprise only 12% of the total U.S. population (Feindler & Ecton, 1986), youth between the ages of 13 and 18 account for 39% of all the arrests for the offenses of homicide, rape, robbery, aggravated assault, burglary, larceny, motor vehicle theft and arson. Adolescents are more likely to commit a crime *or* to be

victimized in a street crime than any other segment of our population. The gross data are startling:

- The United States spends more than $1 billion per year to maintain our juvenile justice system.
- The yearly cost of school vandalism alone is estimated to be one-half billion dollars (Patterson, DeBaryshe & Ramsey, 1989). Within the school environment for the 1986 school year, there were 61,000 aggravated assaults reported (25,000 with injuries), 44,000 robberies (8,700 with injuries), and more than 300,000 simple assaults (80,900 with injuries).
- A weapon was used in more than 70,000 of these violent crimes, including more than 20,000 with knives and 1,700 with guns. (Weitzel, 1988). Although most aggression in school involves student-on-student incidents (McDermott, 1979), assaults on teachers are also problematic. Approximately 125,000 secondary teachers are threatened with physical harm each month and approximately 5,200 actually are physically attacked (Batsche & Moore, 1990).
- In a 1989 Milwaukee (WI) Public Schools survey, the number of assaults on teachers was up 7% over a similar 1988 time period (Ahlgren, 1989). These data indicate the presence of an alarming level of violence and antisocial behavior within some of the nation's schools.

Generalization of Delinquent Behavior

A substantial body of literature demonstrates that the same individuals involved in violent interpersonal crime and delinquency in the schools also emit such behavior in the community (Gold & Moles, 1978; Lorion, Tolan & Wahler, 1987; McDermott, 1984; Wilson, 1977). Wilson (1977) observed:

> we must realize that crime does not occur in the schools in isolation from crime in the rest of society. Indeed, much of what is called "crime in the schools" is really crime committed by young persons who happened to be enrolled in a school or who happen to commit the crime on the way to or from school. (p. 48)

The apparent relationship between school crime and delinquent behavior in the community suggests that an effort designed to reduce the one may have an effect on the other. Consequently, the school has emerged as potentially central to the effort in delinquency reduction (McDermott, 1985; Miller, 1985). Thus, Greenwood & Zimring

(1985) concluded that, after parents, only the schools "have sufficient contact, resources, and authority to mount any serious systematic delinquency prevention efforts that will reach the children who are most at risk" (p.60). The schools are the only service delivery institution that collects, observes and deals with large numbers of children for an extended period of time before they interact with the juvenile justice system (Miller, 1985).

These students can be reliably identified from school-related variables such as achievement and discipline contacts (Loeber & Dishion, 1983; Lorian, Tolar, & Whaler, 1987). The schools' most common reaction to the behaviorally disordered or delinquent youth has been exclusion from the mainstream, usually to special class or out of the system entirely. What is needed is a systematic and effective way for the schools to intervene in the behavior of those youth most at risk for continuing or later antisocial behavior.

One of the most frequently cited school-based prevention-intervention programs in the literature is the Preparation Through Responsive Education Program (or PREP; see Hollin, 1989, for review). PREP was designed for the training of interpersonal skills and academic support for children of all ages experiencing social difficulties in school. Long term outcome findings have not lent support to program efficacy (Burchard & Lane, 1982). Feindler, Marriott, & Iwata (1984) utilized a cognitive-behavioral anger management training procedure with small groups ($n = 6$) of disruptive and delinquent junior high school students. The authors found significant change scores for treatment subjects on dependent measures of problem-solving ability and self-control.

The purpose of the present study was to evaluate a variant of that training procedure to an entire classroom of urban, academically and behaviorally at risk middle school students. The procedure made extensive use of pre-recorded video symbolic modeling techniques and a structured, comprehensive teacher's manual designed for the study. This intervention research targeted incidents of aggressive and disruptive behavior in school, anger control, and self-reported tendencies to behave in an antisocial manner.

METHOD

Subjects

The population pool for this study consisted of middle school students from one building within a large urban school system. The students were those currently assigned to the program for children at risk . This program services approximately 48 students of both sexes. Personal data was completed on each subject identifying age, race, sex, socio-economic status (i.e., eligible for reduced or free school meals), and whether there was a previous juvenile court contact. These data appear in Table 1.

The mean age of the subjects in the experimental group was 13.9 (SD = 0.6). The mean age of the control group was 13.7 (SD = .9). The subjects in the experimental group consisted of 13 males and 9 females. The subjects in the control group consisted of 9 males and 6 females. In the experimental group, 14 of the subjects identified themselves by race as black, and 8 identified themselves as white. In the control group, 10 identified themselves as black, and 5 identified themselves as white. The socio-economic status was determined by whether or not the subject's family income caused them to be eligible for reduced lunch fees. In the experimental group, 15 of the 22 subjects, (68%), were eligible for reduced lunch fees. In the control group, 13 of the 15 subjects (87%) were eligible for reduced lunch fees. In the experimental group, only one subject (04%) had at least one prior contact with the juvenile court. In the control group as well, only one subject (06%) had at least one prior juvenile court contact. Both the experimental and discussion-only control groups took place within the same urban middle school. Both groups were seen within the classrooms normally assigned by their schedule. Classroom teachers were present but not involved.

A modified randomized groups design was used, with one experimental condition and one discussion-only control group. Subjects were assigned to either the experimental condition or the discussion-only control group based on their pre-existing assignment to one of two intact classrooms. Classroom teachers were blind to the condition. Prior to this study, subjects were administratively assigned to

each classroom. Considerations in that assignment were given only to racial and sexual balance. The experimental group was determined randomly by coin-flip.

Attendance at six or more of the ten experimental or discussion-only control sessions was considered the standard for inclusion in this study. Three subjects from the experimental group and seven subjects from the discussion-only control failed to meet this standard.

Dependent Measures

Data from continuous recording of teacher-initiated Incident Referral Forms were examined for all subjects. The IRF is a single page deportment report used by school staff to refer incidences of student aggression or disruptive behavior to an administrator. A baseline was established prior to treatment to determine the mean weekly frequency of Incident Referrals received by subjects in both treatment and control groups.

All subjects received a pretest-posttest battery which included The Children's Inventory of Anger (CIA; Finch, Saylor, & Nelson, 1987), and the Jesness Inventory (JI; Jesness, 1972). The CIA has been shown to be sensitive to changes in the affective component of anger following treatment (Saylor, Benson & Einhaus, 1985). The Jesness Inventory was utilized to measure the subjects' self-reported attitude toward delinquency. Of the nine JI scales, the study was concerned with the Manifest Aggression Scale and the Asocial Index. In their review of multivariate personality inventories, Arbuthnot, Gordon and Jurkovic (1987) concluded that numerous studies have gathered considerable evidence supporting the convergent, concurrent and predictive validity of the JI. An additional dependent measure included a teacher-scored measure, the Teacher's Report Form (TRF; Achenbach & Edelbrock, 1986) to obtain a description of the youth's behavior as observed by the classroom teacher. As an adaptation for this study, the teachers rated the subjects only on those items which cluster into the narrow-band factor of "aggressive." This adaptation was comprised of the 30 items common to females and males.

Procedures

The subjects, remaining in their respective classroom assignments, were seen in one of two treatment groups. The experimental group received the anger-control and problem-solving training ("Think First Program"), in addition to the educational and supportive services normally available to all students. The waiting list/control group received a group discussion placebo intervention along with the normally available educational and supportive services. Both groups met initially for the pretest assessment component. Approximately one week following the pretest assessment, both groups met for the first of 10 group intervention sessions. The groups met twice per week, with each session lasting approximately 50 minutes. Table 2 provides a summary of procedures used in the "Think First Program." One week following the tenth and final session of the training, both groups met for posttest assessment.

The "Think First Program" was adapted from the work of Feindler and Ecton (1986), Grant (1986), and Hains (1989). The training classes lasted 10 sessions, during which time subjects were taught a functional analysis of angry behavior, a self-instructional method of anger-aggression control and a procedure for applying the self-instruction procedures to problem-solving. The training classes made abundant use of modeling (both live and symbolic on pre- recorded video tape) and role-play procedures. An operant procedure utilizing a token exchange system was also employed as an additional inducement to complete self-monitoring homework assignments and encourage attendance. Subjects in the experimental condition were able to earn points by completing a self-monitoring device. Subjects in the placebo condition were able to earn points by merely attending.

Think First Curriculum

- In *Session 1*, group members were taught to conceptualize incidences of angry aggression in terms of their antecedent, behavioral, and consequential properties. A video taped symbolic model was presented to demonstrate the concept. A method of self-monitoring, the "Hassle Log," was introduced. An operant procedure in which points are earned for completed Hassle Logs was explained.

- In *Session 2*, group members were taught to recognize their own physiological and cognitive arousal mechanisms (cues) and to role-play anger-reduction techniques. Video symbolic modeling of a peer-aged group discussing anger cues and a deep-breathing anger reduction technique was presented.
- In *Session 3*, anger provoking incidences were conceptualized as "triggers" to anger. Triggers were further conceptualized as external, (having a verbal or behavioral quality such as being called a name, challenged, shoved, etc.) or internal, referring to cognitive appraisals or self-statements about the external triggers. A video taped symbolic modeling procedure demonstrated external and internal anger triggers.
- In *Session 4*, self-instruction was introduced to the group. Group members first rehearsed overt, out-loud self-instruction, referred to as "reminders." Incidences from "Hassle Logs" were used to model correct timing and fading to covert self-instruction. A symbolic modeling procedure first demonstrated inappropriate, then competent use of the technique.
- In *Sessions 5 and 6*, self-instruction training was continued. Group members' role plays from the "Hassle Logs" in which they appropriately used self-instruction, were video-taped in session, and re-played. Group members had a chance to view themselves modeling the technique on the video tape.
- In *Session 7*, self-instruction as a reinforcer following successful anger control or as self-coaching following a failure was introduced and rehearsed.
- In *Session 8*, self-instruction for anger control was expanded to general problem-solving skills training. The dimensions of problem solving were shown to follow those of the previously learned angry aggression variables: antecedent, behavioral and consequential. Video taped symbolic modeling to demonstrate the recognition phase of problem-solving was used.
- In *Session 9*, group members were taught the need to clearly define the problem, avoiding broad or narrow definitions. The concept of multiple perspectives was introduced. Problems were modeled for group members' analyses. Symbolic modeling demonstrated problem definition.

In Session 10, evaluating the consequences of choosing an identified alternative response was introduced and modeled, both live and through the symbolic procedure. The use of self-instruction to aid in the evaluation process was stressed.

Following the final session, the group members were presented with certificates of completion and a raffle was held using tokens

earned during the training for completion of the Hassle Log. Items available from the raffle included calculators, cassette tapes and pen sets. The placebo control group had a similar raffle with equivalent items.

RESULTS

The school misconduct reporting form, called the Incident Referral Form (IRF), served as a measure of treatment effect. The question was asked whether there would be a significant pre to post-treatment change in the number of specific occurrences of disruptive or aggressive behavior in and around the school building. The means and standard deviations of the subjects IRF totals are shown in Table 3.

The group assignment was the independent variable and the number of IRF's was the dependent variable. A 2 *x* 3 repeated measures ANOVA revealed a significant interaction effect for treatment phase and group [F (2,70) = 9.39, p .0004]. The interaction effect appears to be due to the fact that the control group changed from a mean of .46 per subject over a five week baseline phase to a mean of 1.26 per subject at follow-up phase, five weeks after the conclusion of the classes. The treatment group changed from a mean of .63 per subject at baseline phase to a mean of .45 per subject at follow-up phase. An analysis of the simple effects revealed significant increases in the mean number of IRF referrals in the control group from baseline phase to follow-up phase [F (1,14) = 5.63, p .004)], and from the five week treatment phase to follow-up phase [F (1,14) = 17.49, p .001)]. The treatment group showed a decrease in the mean number of IRF's of approximately .18 per subject from baseline to follow-up, whereas the control group mean increased approximately .80 per subject from baseline to follow-up.

Table 4 presents means and standard deviations from the other dependent measures for both treatment and placebo groups at pre and posttesting. Each dependent variable was analyzed using an analysis of variance for repeated measures.

For the additional dependent measures, no interaction between treatment condition and time of measurement was demonstrated.

Table 1.
Social and demographic characteristics of sample

Characteristic	Experimental Group	Control Group	Total
Total (N)	22	15	37
Age (X)	13.9	13.7	13.8
Sex of Group			
Males	59.5%	60%	22
Females	40.5%	40%	15
Race			
Black	63%	53%	22
White	37%	47%	15
Financial Assistance	68%	80%	27
Juvenile Court Record	04%	06%	2

Table 2.
Think First Program: Summary of Procedures

Session #	
1	Introduction to anger control
2	Anger triggers
3	Cues and anger reducers
4	Introduction to self-instruction
5	Self-instruction continued
6	Self-instruction continued
7	Self-evaluation
8	Anger-control plus problem-solving
9	Generating alternative responses
10	Evaluating consequences

Table 3. Incident Referral Form means (X) and standard deviations (SD) by group for pre-treatment baseline phase, treatment phase, and post-treatment phase.

Groups	Baseline		Treatment		Follow-up	
	X	SD	X	SD	X	SD
Treatment	.63	.78	1.00	1.87	.45	.96
Control	.46	1.06	.33	.81	1.26	1.53

Table 4.
Means (X) and standard deviations (SD) for dependent measures for treatment and placebo-control groups

	Pre		Post	
Dependent Measures	Treatment	Control	Treatment	Control
CIA				
X	201.00	204.80	181.09	186.66
SD	24.2	29.7	30.0	26.7
JI-HA				
X	59.54	62.46	54.86	60.06
SD	9.6	10.3	9.5	10.8
JI-AI				
X	69.50	69.20	66.31	67.73
SD	9.7	12.3	10.7	11.3
TRF				
X	19.77	20.26	24.22	25.80
SD	20.6	19.5	21.3	21.9

DISCUSSION

The purpose of this study was to examine the effects of a 10-session anger-aggression control curriculum on a classroom of at risk middle school students. The results from analysis of dependent measures suggest modest support for the program. Results from an analysis of mean levels of misconduct referrals (IRF) were seen as supporting the efficacy of the program. The IRF is a measure of disruptive behavior across both individual staff members and time of day, thus may be seen as the most reliable indicator of behavioral change. With the at risk population that was the subject of this study, the IRF took on an added significance. Because the students in this special program were self-contained to a greater degree than the general population, there was a tendency on the part of the program staff to take care of discipline problems through in-classroom procedures, without resorting to an IRF referral to an administrator. Consequently, relative to other students, a disproportionate amount of the at risk groups' IRFs came from staff in less structured academic environments, such as industrial arts, physical education, and in non-class environments such as hallways and lunch areas. In addition, the teachers in these environments were more likely to be unaware that the subjects were involved in this study, as they were not specifically informed, nor were they involved in the pre- and post-treatment assessments.

The failure of the treatment condition to demonstrate an interaction effect on the Children's Inventory of Anger (CIA) may indicate that excessive anger was not problematic for these subjects. The normative data provided on this instrument indicates that a score of 203.79 is the mean level for the age group (Finch, Saylor, & Nelson, 1987). At pretest, the mean scores for the experimental and control groups were 201.00 and 204.80, respectively. The findings on the Jesness Inventory (JI) were not significant for the interaction between time of measurement and treatment condition. While anger and aggression management deficits may be critical factors associated with delinquency risk, these results suggest that the curriculum's failure to address other integral factors (e.g., orientation to delinquent subculture values) that produce the Asocial Index may have diluted

the outcome scores. Clearly, a comprehensive prevention curriculum needs to go beyond aggression management and address these additional factors.

The results of the Teacher Report Form (TRF) were inconsistent with the results obtained by the other behavioral method, the Incident Referral Form. The TRF failed to demonstrate a significant interaction effect between time of measurement and treatment condition. Moreover, the trend of the observed change for both the treatment group and the control group was in a negative direction, suggesting a worsening teacher appraisal of the subjects' behavior. A possible explanation for this may be that the teachers' tolerance for subject misbehavior had changed in the interim between pre and post-assessment. The failure of the TRF to demonstrate increased self-control for subjects in the experimental condition may reflect rater bias. Personal stress levels of teachers working with high risk adolescents may influence objectivity over time. Future research is needed to examine the reliability of teachers who work with high risk populations as objective observers of change. An additional explanation may be that the TRF was not sensitive to the kinds of changes that the IRF rate was demonstrating.

One of the most consistent findings in delinquency research is that behavioral and academic difficulties in the school are related to later or ongoing delinquency (Lorian, Tolan & Wahler, 1987). Greenwood & Zimring (1985) observed that the school has emerged as central to delinquency prevention/intervention efforts. Future research should examine the preventive effects of in-school, anger-aggression control training on later delinquency for a population of disruptive students. The use of such a curriculum as an in-school intervention program in cooperation with the juvenile court should be evaluated. Subject pools may include those students on juvenile court probation for anger-related offenses, such as battery and assault. Additional curricula, utilizing the cognitive-behavioral format, should be developed to address the needs of non-aggressive juvenile offenders.

Cognitive-behavioral prevention/intervention curricula which emphasize anger management and problem-solving (e.g., "Think First"), have wide applied value in the public schools or in the correctional facilities. Utilizing the self-instruction and thinking-

ahead constructs, such curricula can be easily adapted to prevention efforts in the areas of drug and alcohol abuse and truancy. In addition, adaptations may be made to staff inservice in the areas of anger and stress management (e.g., Alexander, Sharp & Sullivan, 1980). Symbolic modeling in the form of videotapes was the logical outgrowth of the documented effects of live modeling in therapy (Thelen, Fry, Fehrnbach & Frautschi, 1979). Bandura & Barb (1973) observed that there is little reason to believe that the symbolic processes are different whether the subject is observing a live or a filmed model.

This study made use of pre-recorded video tape to augment didactic, behavioral rehearsal and operant reinforcer aspects of the program. The video models were recorded with professional quality equipment, on-site at a local high school using student actors. The actors represented a distribution of race (black and white) and sex. Each model sequence was brief, with none lasting longer than six minutes. The video models were of high interest for the subjects in the treatment condition. An effort was made to maintain terminology and settings that were relevant to the experiences of the subjects. The video technology made it convenient to pause the tape at critical moments for clarification. In addition, the tape could be re-run for additional modeling impact.

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