

Reducing Relational Aggression through Combined Group Counseling and Parent Education Interventions

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Literature Review

Until recently, nearly all of the empirical investigations of aggression have focused on overt and physically aggressive behaviors in primarily male samples (Coe & Dodge, 1998). However, recent research has suggested that aggression is more covert in females than in males, including relational, indirect and social aggression (Crick & Grotpeter, 1995). Relational aggression is characterized by direct or indirect attacks on relationships with others rather than physical attacks on objects or other people (Crick, 1995). In other words, girls who are relationally aggressive are more likely to express aggression in interpersonal relationships through indirect or relational behaviors rather than physical acts. Relationally aggressive behaviors include telling a peer he/she is not invited to a birthday party, participating in malicious gossip, rumor spreading and the "silent treatment" to isolate or retaliate against a peer (Crick, Ostrove, Appleyard, Jansen & Casas, 2004). Beginning in middle childhood and continuing into adolescence the gender-based manifestations of aggressive behaviors appears to widen (McGee, Feehan, Williams, & Anderson, 1992).

Risk Factors

Relational aggression is most common in girls from families with low socioeconomic status and poor parent management skills (Tremblay, 1999; Udergraft, Thayer, Whiteman, Denning, & McHale, 2005). Insecure, preoccupied attachment styles characterized by intermittent and unpredictable reinforcement and maternal permissiveness have been found to be linked with nonphysical aggression (Casas et al., 2006; Dodge & Petit, 2003). Finally, parental behaviors of psychological control (e.g., withdrawal of love, erratic emotional behavior and invalidating feelings) have been found to be strong predictors of children's relationally aggressive behaviors (Barber, 1996). Controversial peer status and/or rejection, and elevated sensitivities to rejection and abandonment (which is common in children with insecure, preoccupied attachment styles) are also well-researched correlates and predictors of nonphysical aggression (Geiger, Zimmer-Gembeck, & Crick., 2004). Some individual factors such as cognitive biases, temperament, and hostile attribution biases have also been linked to children with high levels of relational aggression (Crick et al., 2006; Park et al., 2005).

Intervention Literature

Some researchers and the popular media have investigated peer group training for girls exhibiting high levels of nonphysically aggressive behaviors; however, these have produced mixed results (Capella & Weinstein, 2006; Talbot, 2000). More promising intervention approaches from the evidence-based prevention literature of other problem behaviors include parent training, family therapy, and group counseling (Kazdin & Weisz, 2003). While there are evidence-based interventions for boys with emerging or clinically significant levels of antisocial, aggressive behaviors, interventions for relationally aggressive girls are still needed. Based on identified risk factors and available intervention literature, a conceptual model of parent training, family consultation and group counseling is proposed. The family consultant and parent training components can be done simultaneously and include parental skill development in positive communication, positive behavior management, behavior monitoring, and awareness of relationally aggressive behaviors (Kazdin, 2003; Webster-Stratton & Reid, 2003). The group counseling component should include skill training in anger control, cognitive behavioral problem solving, group entry, and learning to deal effectively with strong negative emotions (Durlak, Fuhrman, & Lampman, 1991; Pepler, King, & Byrd, 1991).

Current Intervention

Participants

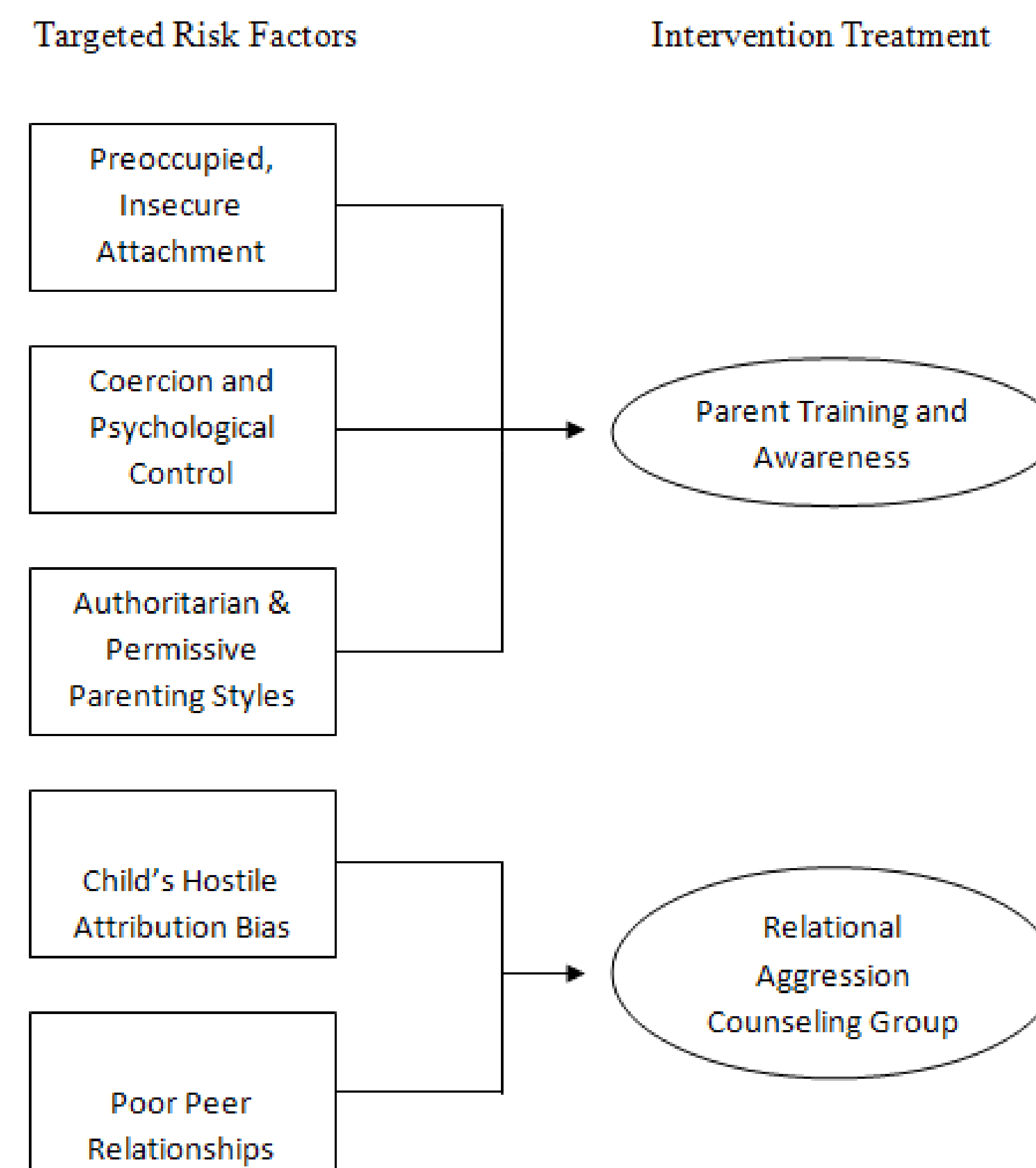
The participants in the group counseling sessions are six 9th and 10th grade girls who were identified by the school counselor as relationally aggressive.

Procedure

The girls are participating in 9 one hour sessions over the course of 9 weeks. The sessions are based on the curriculum, *Relational Aggression in Girls* (Kupkovits, 2008), which includes topics such as awareness, defining normative beliefs, identifying thoughts, feelings and actions associated with relational aggression, assertiveness skills, healthy friendship skills, empathy training, perspective taking, role playing, and goal setting. The format of the sessions consist of discussions, modeling, role plays and take-home activities.

The group counseling sessions are co-facilitated by two of the authors who are graduate students in the Child and Family Interdisciplinary Practicum. The two facilitators meet weekly with their supervisor, who is a Psychologist, to process the previous session and plan for the upcoming session.

Intervention Conceptual Model



Future Research & Clinical Services

Methods

The project will include approximately 30 total female youth participants (5 to 8 potential participants in each of four groups) identified as relationally aggressive by referrals from school staff. Participants within each school will be randomly assigned to treatment groups (single intervention model: group counseling alone vs. dual intervention model: group counseling plus parent component). One treatment group in each school will be conducted in the fall and the spring semesters of the 2009-2010 academic year.

Semester Group	School	With or Without Parent Training	Number of subjects	Total Number of Subjects
Fall 2009 Semester	High School	With Parent Training	5-8	
	Middle School	Without Parent Training	5-8	
	Wait list control group (Spring groups)	No Treatment	10-16	
Spring 2010 Semester	High School	Without Parent Training	5-8	
	Middle School	With Parent Training	5-8	
	Fall 2009 Semester Post- Intervention Group	No Treatment	10-16	

The group counseling curriculum, *Relational Aggression in Girls* (Kupkovits, 2008), includes topics such as awareness, defining normative beliefs, identifying thoughts, feelings and actions associated with relational aggression, assertiveness skills, healthy friendship skills, empathy training, perspective taking, role playing, and goal setting and will be presented over ten sessions. As illustrated in the intervention model, these topics address the individual and peer risk factors for relational aggression cited above, including hostile attribution bias and poor peer relationships. A description of the curriculum can be found at: www.youthlightbooks.com/products/1437.html.

Each participating family will be assigned a trained family consultant responsible for providing support to each youth and family participant throughout the intervention. Support will include weekly phone calls to ask caregivers about implementation of strategies presented at the parent training workshops and to encourage continued progress.

During the first and final weeks of the group counseling intervention, two parent training workshops will be conducted to target family risk factors of relational aggression highlighted above. Curriculum will be based on the content of the *Relational Aggression in Girls* curriculum and knowledge of effective parenting strategies from the literature, including awareness of relational aggression, parent monitoring and supervision, parent-daughter relationship building, and development of positive and appropriate attachments.

Expected Outcomes & Analyses

The purpose of this proposed research is to test the implementation and effectiveness of a dual intervention model for reducing relational aggression among girls, as there is a need for empirically-validated treatments in this area. Specifically, this research will examine the differences between counseling groups with and without a parent component. Goals and objectives for the project are outlined as follows:

1. We will see a statistically significant difference between a dual intervention model (parent workshop and group therapy) and a single intervention model (group therapy alone) in both middle and high school group samples. This difference will be measured by conducting a repeated measures Analysis of Covariance (ANCOVA) to control for potential key demographic variables which may impact the dependent variables.
2. We will see a statistically significant reduction in scores on the Children's Social Behavior Scale (CSBS)-Student and Teacher reports.
3. We will see a statistically significant increase in scores on the Parenting Sense of Competence Scale (PSOC) and Parent Knowledge and Relational Aggression Knowledge and Beliefs Scale (RA-KBS) Parent reports.
4. Based on data, we will be able to design a more accurate path model connecting risk factors, potential mediating/moderating variables, and outcomes of girls and families with relationally aggressive behaviors, for use in future research.

Conclusions & Implications

Relational aggression is an increasingly common and costly problem in families and American schools and has long-term psychosocial impacts for girls and their families (Crick, 1996; Crick & Bigbee, 1998; Crick & Grotpeter, 1995). Therefore, developing and evaluating intervention and prevention practices is an important next step.

Identifying effective interventions can have a significant impact on the lives of girls and their current and future families. Despite risk for social and psychological maladjustment, little, if any, research has explored the effectiveness of interventions developed to prevent and reduce covert aggression in girls (Capella & Weinstein, 2006). Thus there is a need to develop and empirically-validate treatments in this area. This project is a first step in addressing this gap in the research and clinical practice. The use of a dual intervention model, such as with this project, offers a unique contribution to the field of reduction of relational aggression in girls because intervention programs that combine two or more effective programs, such as group counseling and parent education, can be more effective than a single program alone (Battistich, Solomon, Watson, & Schaps, 1997). Integrating parent training with group counseling would expand the intervention to participant family systems and increase the potential for effectiveness in reducing relationally aggressive behaviors.