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[Archived] Preventing Aggressive Behaviour Early in Life: Comments on Webster-Stratton, Lochman, and Domitrovich and Greenberg

Kenneth A. Dodge, PhD

Duke University, USA

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Introduction

Webster-Stratton, Lochman, and Domitrovich and Greenberg have all evaluated and synthesized the state of knowledge regarding the prevention of aggressive behaviour in young children. In current models of the development of chronic aggression problems, developmental science has focussed on the period between ages 3 and 6, based on the contention that this is the time in life when patterns of behaviour become relatively stable, predictive of adolescent chronic conduct problems, and ripe for early intervention. Over the past decade, a critical mass of empirical studies regarding the efficacy of novel intervention programs has emerged. It is therefore appropriate for these reviews to have been conducted at this time.

Research and Conclusions

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Reviewers Webster-Stratton, Domitrovich and Greenberg, and Lochman summarize interventions into categories focussing on the child, parent, or teacher, and programs that are explicitly multi-modal. Their evaluations suggest that most favourable outcomes have resulted from interventions that are parent-focused. Programs that teach parents to implement consistent, non-violent strategies in managing child misbehaviour have the most positive effects in reducing child aggression. Other programs provide some evidence of success, but the findings on these programs are not as clear, persuasive, or numerous.

Several general conclusions have been consensually reached by the reviewers. First, the number of controlled studies is still found to be relatively small and it was suggested that these studies be exponentially expanded over the next decade. This suggestion takes on special significance in the context of the current policy debate over the nature of early childhood programming. In the United States, the goal of improving education outcomes for children is leading to increased funding for early childhood programs that help high-risk children prepare to learn in kindergarten. The controversy is whether such efforts should be directed towards cognitive development (through direct didactic instruction in pre-reading skills and phonics) or broader social-emotional-behavioural development (through the provision of nurturing contexts such as daycare and the direct programming of children's social development). The importance of interventions in preventing aggressive behaviour in high-risk preschool children takes on an even greater importance in this policy context.

The second conclusion reached by the reviewers was that the next generation of interventions should reflect a greater understanding of the developmental level of child recipients. Programs may be quite different for 2-, 3-, and 4-year olds. Furthermore, an assessment of functional developmental levels in individual children may be necessary in order to provide optimal interventions to each child. For example, some child-focused interventions may be predicated on verbal skills that, if lacking, will render a program ineffective. This point is relevant not only for children of differing developmental levels, but also for immigrant children who come to the school setting from different language contexts and cultural backgrounds.

The third conclusion reached by the reviewers was that more basic developmental research is needed to inform the creation of novel intervention programs (the precise nature of the developmental research is not specified). Most developmental research is not grounded in the need to create interventions; rather, it consists in testing the hypotheses of basic developmental theories about individual children. Problem-focused developmental research that could more

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directly inform intervention development is needed. For example, optimally targeting interventions based on their appropriateness for children could enhance the cost-effectiveness of programs. Past developmental research is only helpful in sketching out general categories of aggressive children. We need research that examines optimal cut-offs for inclusion in a program, the benefits of selecting children based on assessments in multiple domains, and the costs and benefits of intervening earlier versus later within the preschool period.

Although there was general consensus among the reviewers, some of the points they raised were somewhat contradictory. Webster-Stratton concluded that her intervention was the *only* program that has yielded consistently favourable outcomes, whereas the other reviewers referred to other programs that have also yielded positive results. Most notable were 1) Domitrovich and Greenberg's review and their positive evaluation of Shure's[1,2,3] child-focused social skills enhancement program, and 2) Lochman's review of Olds'[4] home-visiting programs.

Domitrovich and Greenberg came to the conclusion that multi-modal programs yield the most favourable outcomes. This conclusion has a sound theoretical basis in developmental research that links the development of aggressive behaviour to a complex myriad of child, family, peer, neighbourhood, and school factors. However, Domitrovich and Greenberg provided no examples of studies that compared single-modal with multi-modal approaches. Such studies are certainly warranted and would appear necessary before any final conclusions can be drawn.

A comparison of the programs in these three reviews suggest that the conceptualization of interventions requires more expansive consideration and greater inclusiveness. For example, Domitrovich and Greenberg reviewed parent-focused programs and included only initiatives to train parents in behaviour-management skills. They failed to consider the promising aspects of the nurse-practitioner home-visiting approach lauded by Lochman. This said, the full range of the programs considered by these authors would still yield a decidedly narrow range of services. Perhaps the most important criticism of these reviews is that they preclude a broader conceptualization of interventions to prevent aggressive behaviour in young children. Indeed, at least two kinds of interventions might be added to the list for consideration in this domain.

One major intervention that may be undertaken by parents is to place a child in a specific type of setting at a specific point in his or her development. Parents may elect to live in a particular neighbourhood, to be employed outside of the home, and have additional children (or not) in a given period of time. They may also choose to place their child in daycare at a given age, and

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choose the type of childcare their child will receive (home-based, centre-based, etc.). There is a growing consensus in developmental literature that very early placement in a group-care setting may be harmful, just as delaying exposure to unfamiliar peers for too long may also be harmful. These interventions may have dramatic effects on aggressive behavioural development and their implementation should be considered for use along with structured psychological interventions.

Another intervention that has perhaps the most far-reaching effect on child aggressive development in children is the provision of a safe, warm, nurturing, and stable home environment. The developmental literature suggests that children are at risk for aggressive development if they live in a family filled with stress, if they are physically abused, or if they are poor. Interventions that mitigate parents' stress, keep parents from abusing their children, or help families move out of poverty may all prevent children from becoming aggressive. Thus, programs such as welfare, childcare subsidies, and home visits may all hold promise as preventive interventions against adverse child outcomes. Perhaps the next generation of reviews in this general area will include such interventions, and perhaps the next generation of parent-focused intervention programs will include like considerations along with behaviour management training.

References

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