Coping Power Program



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Coping Power Program

Developers

John Lochman, Ph.D.

Karen Wells, Ph.D. Lisa Lenhart, Ph.D. Background Information and Purpose of This Program

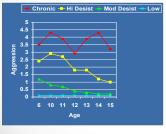
Why does Coping Power target aggressive children?

- > An important aspect of any intervention is that it targets key developmental risk factors for the specific problem of interest
- ➤ Children's aggressive behavior predicts later negative outcomes such as delinquency and substance abuse

What is the course of aggressive behavior in childhood? Girls Boys

 Frequency of physical aggression steadily decreases from age 2 to 12 (Tremblay & LeMarquand, 2001)

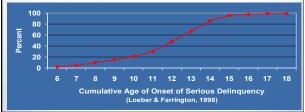
Is aggressive behavior a stable behavior pattern?



Subgroup of chronic aggressive children are at risk of most physical violence during adolescence (Nagin & Tremblay, 1999)

Does children's aggressive behavior predict later negative outcomes?

- · School problems and school failure
- Substance use
- Delinquency



Risk Factors on the Developmental Trajectory for Children's Aggressive Behavior

(Coie & Dodge, 1998; Hawkins, Catalano & Miller, 1992; Loeber & Farrington, 2001; Pennington, 2002)

- · Child Factors: biology and temperament
- Family Context
- Neighborhood Context
- Peer Context
- Later Emerging Child Factors: social cognitive processes and emotional regulation

Risk Factors on the Developmental **Trajectory for Childhood Aggression**

- Child Factors: biology and temperament
- Family Context
- Neighborhood Context
- Peer Context
- · Later Emerging Child Factors: social cognitive processes and emotional regulation

Child Factors: Biology and **Temperament**

- Genetic Heritability (Eley, Lichtenstein & Stevenson, 1999)
- Prenatal and Birth Complications (Arseneault, Tremblay, Boulerice, & Saucier, 2002; Brennan et al, 1999; Delaney-Black, 2000; Kelly et al, 2000; Raine, Brennan & Mednick, 1997; Rasanen, Hakko, Isobarmi, Hodgins, Jarvelin, & Tiihonen, 1999)
- Autonomic Arousal (Colder, Lochman, & Wells, 1997)
- Hormones (Dabbs & Morris, 1990)
- Neuropsychology (Scarpa, Bowser, Fikretoglu, Romero, & Wilson, 1999)
- Neurotransmitters (Caspi, McClay, Moffitt, Mill, Martin, Craig, Taylor, & Poulton,
- Temperament (Coon Carey, Corley, & Fulker, 1992)

Summary of Biological and **Temperament Risk Factors**

- Prenatal factors such as maternal substance use and severe nutritional deficiencies can contribute to child aggression
- Birth complications, certain genes, high cortisol reactivity, and difficult temperament all predict later child aggression, but only in interaction with environmental factors (e.g. harsh parenting, poverty)

Risk Factors on the Developmental Trajectory for Childhood Aggression

- · Child Factors: biology and temperament
- Family Context
- Neighborhood Context
- Peer Context
- Later Emerging Child Factors: social cognitive processes and emotional regulation

Family Context

- There are a wide array of family factors that can affect child aggression and conduct problems
 - LOW SES (Sampson & Laub, 1993)
 - Parent criminality (Loeber, & Stouthamer-Loeber, 1998)
 - Substance USE (Barry, Dunlap, Cotton, Lochman, & Wells, 2005)
 - Parental depression (McCarty, McMahon, & Conduct Problems Prevention Research Group, 2003)
 - Marital conflict (Dadds & Powell, 1992)
 - Stressful life events (Barry et al., 2005; Guerra, Huesmann, Tolan, VanAcker, & Eron, 1995)
 - Parental physical aggression (spanking and more punitive discipline styles) (weiss, Dodge, Bales, & Pelit, 1992)

Risk Factors on the Developmental Trajectory for Childhood Aggression

- · Child Factors: biology and temperament
- Family Context
- Contextual Community and School Factors
- Peer Context
- Later Emerging Child Factors: social cognitive processes and emotional regulation

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Contextual Community and School Factors

- In addition to family interaction problems, peer rejection, and involvement in deviant peer groups, neighborhoods and school environments have also been found to be risk factors for aggression and delinquency over and above the variance accounted for by family characteristics (Kupersmidt, Griesler, DeRosier, Patterson, & Davis, 1995).
- Neighborhood crime rates and social cohesion can affect disruptive behavior in children (Colder, Mott, Levy & Flay, 2000; Guerra, Huesmann & Spindler, 2003 Majumder, Moss & Murrelle, 1998; Maughan, 2001) and begins to have heightened effects on the development of antisocial behavior during the middle childhood, preadolescent (Ingoldsby & Shaw, 2002)
- Schools can further exacerbate children's conduct problems, as children experience frustration from academic demands and from peer influences (Barth, Dunlap, Dane, Lochman, & Wells, 2004; Kellam, Ling, Mersica, Brown, & Lalongo, 1998).

Risk Factors on the Developmental Trajectory for Childhood Aggression

- · Child Factors: biology and temperament
- Family Context
- Neighborhood Context
- Peer Context
- Later Emerging Child Factors: social cognitive processes and emotional regulation

Peer Context

- <u>Peer Rejection</u>: By elementary school, aggressive behavior can lead to peer rejection, although the relation is bidirectional (coie, Dodge & Kupersmidt, 1990)
 - Additive risk for aggression and rejection exists (Coie, Lochman, Terry & Hyman, 1992)
- <u>Deviant Peers:</u> Peer rejection from the broad peer group may set the stage for involvement with deviant peers, which is itself a critical peer risk factor by adolescence

Risk Factors on the Developmental Trajectory for Childhood Aggression

- · Child Factors: biology and temperament
- Family Context
- Neighborhood Context
- Peer Context
- Later Emerging Child Factors: Social Cognitive Processes and Emotional Regulation

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Later Emerging Child Factors: Social Cognitive Processes and Emotional Regulation

- Starting in the first year of life, 3 principal components of self regulation can begin to emerge, in part due to socialization (Keenan, 2002), and continue through childhood
- Development of behavioral control, involving inhibiting impulses, delay of gratification, and distraction
- 2. Development of empathy, recognizing how one's behavior affects others
- 3. Management of negative emotions

Emotion Regulation: Socialization of Anger

- Children's language skills can assist in fostering their self-regulation and social interaction
- Aggressive children's weak verbal abilities can make it difficult for them to directly communicate their needs and ideas
- Among aggressive deaf children, poor communicative competence has been directly linked to their aggressive behavior (r=.49), and intervention focusing on anger management and problem solving has enhanced their communication competence (Lochman, FitzGerald, Gage, Kannaly, Whidby, Barry, Pardini, & McEtroy, 2001)

Conceptual Model: Contextual Social-Cognitive Model of Prevention

- Influence by research supporting the six-stage model of social information processing (Lochman & Wells, 2002)
 - 1. Children encode relevant details in the environment
 - 2. Generate interpretations about the nature of the situation
 - 3. Formulate a social goal that will influence their response (avoid conflict, get revenge)
 - 4. Generate a list of possible responses
 - 5. Evaluate the quality of each response
 - 6. Enact the chosen response

Social Cognitive Processes in Aggressive Children

Appraisal Steps (Crick & Dodge, 1994; Lochman, Whidby & FitzGerald, 2000)

- Cue encoding difficulties, by excessively recalling hostile social cues
- Hostile attributional biases, and distorted perceptions of self and others in peer conflict situations
- 3. Dominance and revenge oriented social goals
- 4. Generate less competent problem solutions, with fewer verbal assertion, compromise and bargaining solutions
- Expect that aggressive solutions will work, and value aggressive solutions more
- 6. Poor enactment of solutions, due to weak social skills

Social Cognitive Deficiency/ Distortion	Coping Power Activities
Cue Encoding Difficulties	Perspective-Taking
Hostile Attribution Bias	Perspective-Taking
Non-Affiliative Social Goals	PICC Model - Choices
Less Competent Problem Solutions	PICC Model - Choices
Expect Aggressive Solutions to Work	PICC Model - Consequences

Reactive and Proactive Aggression

(Dodge & Coie, 1987; Dodge, Lochman, Harnish, Bates & Pettit, 1997; Lochman & Wells, 1999)

- Reactive Aggression:
- Encoding errors
- Hostile attributions
- Lower perceived social and general competence
- More sad and depressed
- More harsh and noninvolved parenting
- Neighborhood violence
- Proactive Aggression:
- Expectations that aggression will work
- Low fearfulness
- Cognitive dysregulation little concern for long-term consequences or goals
- Involved with peers who are approving of deviant behaviors

Automatic vs. deliberate processing, affecting selection of solutions to social problems

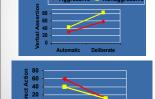
Effects of Deliberate vs Automatic Processing on Problem Solving

(Lochman, Lampron & Rabiner, 1989; Rabiner, Lochman & Lampron, 1990)

- When emotionally activated, children use more automatic processing
- Aggressive children use more impulsive automatic processing

.

Effects of Deliberate vs Automatic Processing on Problem Solving



Both aggressive and nonaggressive boys who use automatic processing produce 50 % fewer verbal assertion solutions and three times more direct action solutions than when they use deliberate processing (e.g. instructed to wait 20 seconds before responding)

Summary: Developmental Sequencing of Risk Factors

- As children move on escalating trajectories towards serious adolescent conduct problems, there is a developmental stacking of risk factors (e.g., community + temperament + parenting + peer rejection + social cognitive deficiencies + school failure + deviant peers) over time
- · Later interventions must address multiple risk factors
- Thus, early interventions can impact children's increasingly stable aggressive behavior before additional risk factors accumulate

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Coping Power Intervention Effects

Coping Power Intervention Research

- 2 efficacy and effectiveness studies in Durham, NC [Lochman & Wells (2002a) Development and Psychopathology; (2002b) Psychology of Addictive Behaviors; (2003) Behavior Therapy; (2004) Journal of Consulting and Clinical Psychology]
- Dissemination study in Tuscaloosa, AL (CDC funding)
- Dissemination study with aggressive deaf children in a residential school in NC [Lochman, FitzGerald, Gage, Kannaly, Whidby, Barry, Pordini, & McElroy, (2001). Journal of the American Deafness and Rehabilitation Association]
- Clinical trial with CD/ODD outpatients in a child psychiatry outpatient clinic at Utrecht University, the Netherlands [van de Wiel, Matthys, et al, (2003) Behavior Therapy]
- Field trial in Birmingham area schools (NIDA funding)
- Group vs Individual formats (NIDA funding)

NIDA-funded study of Child Component only vs. Child and Parent Components

Lochman & Wells (2004), Journal of Consulting and Clinical Psychology, 72, 571-578

Sample

- 183 high risk boys, in the top 22% of teacher-rated aggression on a screening measure administered in the 4th and 5th grades of 11 schools, randomly assigned to 3 conditions: Child Component Only, Child + Parent Component, Control [73% assessed at the follow-up]
- 61% African American, mean income of \$25,000
- No baseline differences across conditions in ethnic status, cognitive ability, or aggression screen score
- Normative Comparison: 63 non-risk boys: 47% African-American, mean income of \$35,000 [87% assessed at follow-up]

Effect Sizes of Contrasts with Control Cell: Outcomes at 1 Year Follow-up

	Child Component Only	Child + Parent Component
Delinquency	-	.37*
Substance Use (Parent- rated)	-	.66*
School Behavioral Improvement	.42*	.34*

One-Year Follow-up Outcomes for the CSAPfunded Study

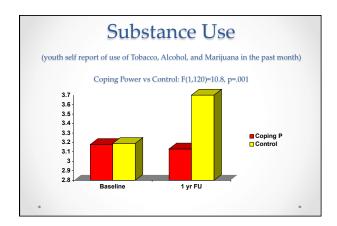
Lochman & Wells (2002) Psychology of Addictive Behaviors, 16, S40-S54

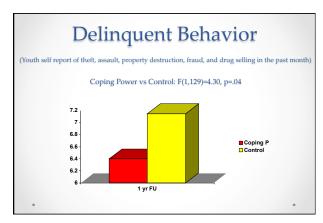
Lochman, J.E. & Wells, K.C. (2003), Behavior Therapy, 34, 493-515

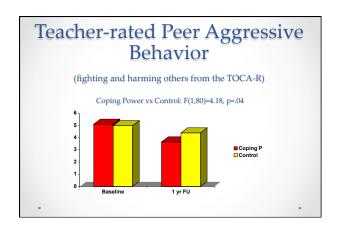
Sample

- 245 moderate to high risk children, in the top 30% of teacher-rated aggression on a screening measure administered in the 4th grades of 17 schools
- 66% male
- 78% African American
- No baseline differences across conditions in sex, ethnic status, cognitive ability, or aggression screen score
- 84% assessed at one-year follow-up, 83% assessed at twoyear follow-up

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Conclusions Across 2 studies, the Coping Power Program, a cognitive-behavioral preventive intervention, has outcome effects at a one-year follow-up, on children's substance use, delinquent behavior, and teacher-rated aggressive and problem behaviors, and in the Dutch UCPP study, substance use outcome effects at a four-year follow-up for youths with clinical diagnoses Mediation: Intervention produced improvements are mediated, in part, by improvements in children's attributions and anger, expectations about the utility of aggression, locus of control, and parenting behaviors



Coping Power Child Component

- 34 sessions
- Weekly meetings, typically 45 60 minutes
- 4 to 6 children and 1 to 2 leaders per group recommended
- Periodic 1-to-1 sessions
 - Reinforce generalization of skills to other settings
 - Tailor goal setting and problem-solving
 - o Enhance relationship with adult co-leaders

Coping Power Child Component

Group intervention offers important

- Allows therapist to directly observe social skill difficulties and improvements
- Permits role-playing, active practice of skills
- Social reinforcement for goal attainment and positive participation
- Positive peer models
- · Can make treatment more efficient

Getting Started: Behavior Management Strategies in CP

- Token economy (point system) for behavior in and out of
- Leader provides frequent labeled praise for positive behavior during sessions
- Leader models problem-solving and emotion-management
- Students help generate "rules"
- · Warning "strikes" given for rule violations
- Positive feedback time at end of session
- Incentive system ("prize box")

Repeated Session Structure

- Opening Activities
 - Set agenda
 - Review goal sheets
 - o Review main points from previous session
- New content lessons and activities
- Closing Activities
 - o Positive Feedback
 - o Prize Box
 - Optional Free Time

Foci for Coping Power Child Component

- Behavioral and personal goal setting
- Organizational and study skills
- Accurate awareness feelings related to anger and vulnerability
- Anger management training, including methods for self-instruction, distraction, and relaxation
- Perspective-taking and attribution retraining
- Social problem-solving in a variety of situations (peer, teacher, family)
- Resistance to peer pressure, and focus on involvement with non-deviant peer groups

Outline of Child Component Sessions

Session 1

• Sessions 2-3 Session 4

• Sessions 5-6

• Sessions 7-10

Session 11

Sessions 12-14

• Session 15

Sessions 16-19 Sessions 20-22 Structure and purpose of group

Long-term and short-term goals

Organizational and study skills Physiological arousal and feelings

Anger management training Relaxation and overcoming barriers

to self-control Perspective-taking

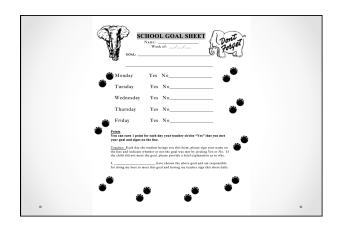
Perspective-taking and problem

Social problem solving training Creation of PICC videotapes

End of Year Review

Goal Setting

- Discuss the concept of personal behavioral
- Explain short-term vs. long-term goals
- Introduce Goal Sheet
- Will utilize Goal Sheet throughout entire program
- Child will earn 1 point per day (up to 5 points/ week at school or 7 points/week at home) that parent/teacher signs sheet indicating that child met the goal



Outline of Child Component Sessions

Structure and purpose of group Session 1 • Sessions 2-3 Long-term and short-term goals

 Session 4 Organizational and study skills

 Sessions 5-6 Physiological arousal and feelings Sessions 7-10 Anger management training

Session 11 Relaxation and overcoming barriers to self-control

 Sessions 12-14 Perspective-taking

Session 15 Perspective-taking and problem

 Sessions 16-19 Social problem solving training Creation of PICC videotapes Sessions 20-22

End of Year Review

Organization and Study Skills

- This is a game designed to help children learn more effective organizational skills.
- "We are giving each of you some words listed on these papers. What we want you to do is to take a few minutes and put these pieces of paper into some kind of order."
- "Now I am going to ask each of you to find three of the words from those papers you just put in order. We will see who can find the word I give them the quickest."

Outline of Child Component Sessions

 Session 1 Structure and purpose of group Sessions 2-3 Long-term and short-term goals

 Session 4 Organizational and study skills Sessions 5-6 Physiological arousal and feelings

Sessions 7-10 Anger management training Session 11 Relaxation and overcoming barriers to self-control

Perspective-taking Sessions 12-14

 Session 15 Perspective-taking and problem

Sessions 20-22

 Sessions 16-19 Social problem solving training

Creation of PICC videotapes

End of Year Review

Outline of Child Component Sessions

 Session 1 Structure and purpose of group • Sessions 2-3 Long-term and short-term goals

Session 4

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Organizational and study skills Physiological arousal and feelings

• Sessions 7-10 Anger coping training

Relaxation and overcoming barriers to self-control

Perspective-taking

 Sessions 12-14 • Session 15 Perspective-taking and problem

Sessions 16-19 Social problem solving training Sessions 20-22

Creation of PICC videotapes

End of Year Review



Anger Coping Training

Key points and activities during sessions:

- Easier to cope with problems if we don't feel so angry
- How can we <u>reduce</u> our feelings of anger?
 - o Distraction, focusing attention on something else (e.g. fun things to do later in the
 - Self instruction or self-statements
 - o Deep breathing

Anger Coping – A Sequence of Activities

- Memory Game using deck of playing cards
- Dominoes- build a tower using one hand
- Puppet Exercise puppets tease each other
- Self-control "taunting exercise" leader and child take turns coping with real teasing (Goodwin & Mahoney, 1967)

Sample Coping Statements

- Stay calm. Just relax.
- As long as I keep my cool, I'm in control.
- What she says doesn't matter.
- · I'll grow up, not blow up.
- · It's too bad he has to act like this.
- · I don't need to prove myself to any one



Outline of Child Component Sessions

- Session 1
- Sessions 2-3
- Session 4 • Sessions 5-6
- Sessions 7-10
- Session 11
- Sessions 12-14 • Session 15
- Sessions 20-22
- Sessions 16-19

Structure and purpose of group Long-term and short-term goals Organizational and study skills

Physiological arousal and feelings

Anger management training

Relaxation and overcoming barriers

to self-control Perspective-taking

Perspective-taking and problem

Social problem solving training Creation of PICC videotapes

End of Year Review

Social Problem-Solving: The PICC Model

Problem

dentification

Choices

Consequences

Outline of Child Component Sessions

Session 24

Session 25

Sessions 26

Session 27

Session 28

Sessions 29-30

Session 31 Sessions 32-33

Session 34

Review of year 1

Organizational and study skills review

Problem solving with teachers Social skills: making friends and being a

friend

Problem solving: group entry and peer

Problem solving: sibling conflict Peer pressure and refusal skills

Coping with neighborhood problems

Joining positive peer groups

Review and termination

Making New Friends and Being a Friend

- Joining Activities and Making new Friends
- Positive Qualities of Self and Others
- · Wanted: A Good Friend

Outline of Child Component Sessions

Session 23

Session 24

Session 25

Sessions 26

Session 27

Session 28

Sessions 29-30 Session 31

Sessions 32-33

Session 34

Review of year 1

Organizational and study skills review

Problem solving with teachers

Social skills: making friends and being a

Problem solving: group entry and peer

negotiation

Problem solving: sibling conflict

Peer pressure and refusal skills

Coping with neighborhood problems Joining positive peer groups

Review and termination

Peer Pressure

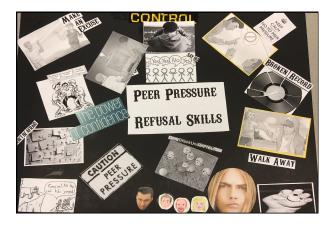
Why Kids Might Give In

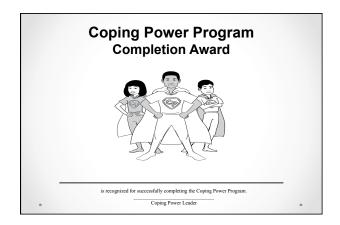
- Group Acceptance (to be accepted by the group)
- Approval (so that other kids will like you)
- Repetition (someone keeps bugging you until you
- Being Threatened Physically/Socially (someone threatens to hurt them if they do not do it/threatens to tell everyone what a wimp you are
- Being Put Down (kids do not want to be teased)
- Reassurance (other kids say that there is no way you can get caught)

Refusal Skills

What Can I Do?

- Say No Thanks
- Broken Record
- Make an Excuse
- Leave the Situation Change the Subject
- Make a Joke
- Try to Use Peer Mediation
- · Act Shocked
- Flattery
- Suggest a Better Idea
- Return the Challenge
- · Find Other Kids to Hang Out With

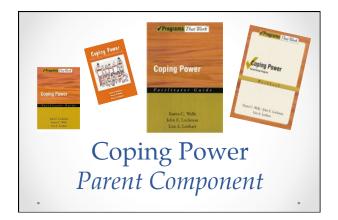




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Coping Power Parent Component

- · Group format with two co-leaders.
- 6 to 12 sets of parents in each parent group
- 16 sessions
- 60 90 minute meeting time

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Parent Session Structure

- Set agenda and display in prominent location
- Start by "checking in" with families. Elicit positive reports on children's behavior, attributes, successes.
- Share information about children's groups.
 Provide specific examples, videos, demonstrations, etc.

Parent Session Structure

- Ask parents if they have noticed children practicing their new skills at home.
- Review information covered in previous meetings. Emphasize importance of continuing to implement previously-learned skills.
- Always review homework and problem-solve if not completed.
- Ask parents to share successes and problems in implementing new skills.

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Foci for Coping Power Parent Component

- Positive attention and rewards for appropriate child behavior
- Ignoring minor disruptive behavior
- Provision of clear commands, rules, and expectations
- Use of consistent consequences for negative child behavior (response cost, time-out, withdrawal of privileges)
- Monitoring of children's behavior in the community

Foci for Coping Power Parent Component (cont.)

- Improvement of family communication and increasing family activities
- Improvement of parents' own stress management
- Informing parents of children's current work on social-cognitive skills (e.g., problem-solving skills) in their group, so parents can reinforce children's use
- Academic support at home

Outline of Parent Sessions

- · Session 1 Introductions, Overview, and Academic Support
- Session 2 Academic Support in the Home
- Session 3 Stress Management Part 1
- Session 4 Stress Management Part 2
- Session 5 Basic Social Learning Theory and Improving the Parent-Child Relationship
- · Session 6 Ignoring Minor Disruptive Behavior
- Session 7 Giving Effective Instructions to Children
- Session 8 Establishing Rules and Expectations

Outline of Parent Sessions

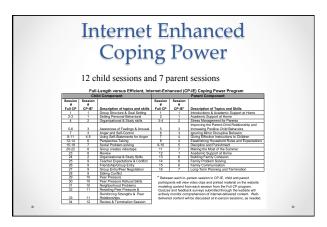
- · Session 9 Discipline and Punishment Part 1
- Session 10 Discipline and Punishment Part 2
- Session 11 Getting Ready for Summer
- Session 12 Academic Support in the Home Review Session
- Session 13 Building Family Cohesion
- Session 14 Family Problem Solving
- Session 15 Family Communication
- Session 16 Long-Term Planning, Termination

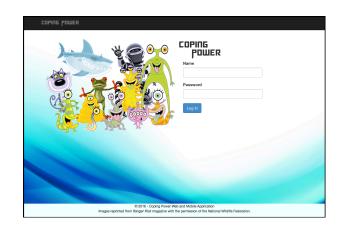
Adaptations

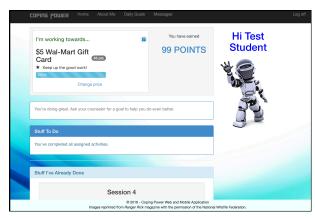
Versions of the Program

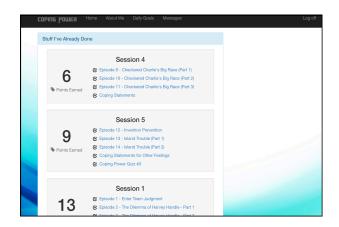
- Standard Coping Power for 4th and 5th Graders
 - Original 34 Session Program
 Abbreviated 25 Session Program
- · Individual or Group Coping Power
- · Early Adolescent Coping Power
- · Internet Enhanced Coping Power
- · Mindful Coping Power



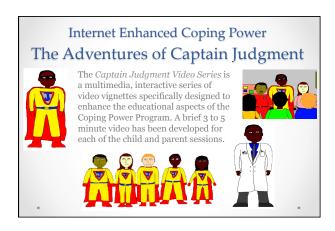




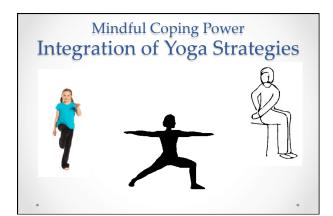












Mindful Eating Another exercise added to the standard curriculum to teach the children in the group to be in the moment during everyday The children are each given a chocolate chip cookie and the leader walks them through the process of eating the cookie using each of his/her senses. "Look at the cookie and notice the color and any subtle differences" "Feel the cookie and play close attention to the texture. Is if the same on both sides?" "Now close your eyes and smell the cookie. What are the different smells that you notice?" "Take a very small bite of the cookie. Pay attention and notice exactly how the cookie tastes". "How does the taste change as you keep chewing? Does it get stronger? Weaker? "Can you hear any sound when you chew the cookie?"

Thank You! Questions??

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