

News from the Center on Human Development and Disability at the University of Washington Health Sciences Center

CHDD research affiliate studies prevention of long-term behavior problems in Head Start preschoolers

About one-third of children enrolled in Head Start have significant behavior disorders and/or developmental delays, according to research conducted by Carolyn Webster-Stratton, Ph.D. The federally funded program, now almost 40 years old, serves disadvantaged children in low-income families throughout the nation, with the overall goal of increasing readiness for school.

A University of Washington professor of nursing, director of the UW's Parenting Clinic and research affiliate at the Center on Human Development and Disability, Webster-Stratton has been conducting research at the UW into early childhood conduct problems for 23 years, developing and evaluating training programs for parents, teachers and at-risk children. CHDD has been actively involved in research involving Head Start for many years on a number of fronts, including research into mother-child attachment with low income families enrolled in Early Head Start.

For the first years of the Parenting Clinic's existence, its focus was on children who were already diagnosed with significant behavior problems such as oppositional defiant disorder or conduct disorder. Webster-Stratton and her colleagues developed treatments to work with families and to help teachers manage the classrooms in which these children were enrolled. Children participated in a small-group after-school treatment program called Dinosaur School, a social, emotional and problem-solving curriculum designed to promote social and academic competence.

To extend the reach of services, the decision was made in 1990 to conduct research into whether the Parenting Clinic's treatment programs would also work as prevention programs in the classroom, where interventions could be offered in a non-stigmatizing way before conduct problems escalate. The clinic staff began working with families of preschoolers enrolled in Head Start programs in the Seattle area, where the children, mainly three- and four-year olds, were at high risk for behavior problems and were already being offered services to promote school readiness.

"This sample of socioeconomically disadvantaged preschoolers is at higher risk for developing oppositional behavior disorders

and attentional hyperactivity disorders, as well as experiencing learning and language delays," said Webster-Stratton. "By developing interventions targeted at training teachers and parents to enhance children's social competence, reduce aggression and strengthen pre-reading and pre-writing literacy skills, we hope to prevent some of the secondary risk factors such as school failure, peer rejection and conduct disorders. We want to help parents bring out the best in their children, encourage their special competencies, and nip behavior problems in the bud. Managing behaviors in preschool and kindergarten classrooms is a major issue for teachers, and our goal is to



Dr. Carolyn Webster-Stratton works with children during "circle time" in a Head Start classroom where her Dinosaur School program, long used as a treatment program, is now being studied as a way to prevent behavior problems in at-risk children. A parent observes.

help them use classroom management strategies and a social-emotional curriculum that fosters children's self-regulation skills, problem solving and emotional literacy."

In their current research, the investigators have adapted Dinosaur School and are presenting it with teachers twice a week not only to children with behavior problems, but to every child in participating classrooms. By the time the project concludes next year, most Head Start classrooms in Seattle public schools will have been offered the program. Since 50 to 70 percent of participating families are from minority and immigrant groups, the program is offered in a number of languages.

Participating classes are randomly assigned to receive the prevention program or to receive the assessment but no program. Those chosen for the assessment-only group are given the opportunity to receive the program the following year. Funding for substitute teachers is provided so classroom teachers can receive training. "Teachers already have so much on their plates, but we take responsibility

for the preparation and materials, and they learn as they teach with us,” said Webster-Stratton. “Our hope is that they will see the value of the program and incorporate it into their curriculum in subsequent years.”

The Dinosaur School curriculum focuses on “emotional literacy” and helping children learn words to express their feelings and understand other people’s feelings. Such skills as effective problem-solving, anger management, making and keeping friends, and communicating with others are taught during “circle time,” using child-sized puppets named Dina Dinosaur, Wally Problem-Solver, Molly Manners and Tiny Turtle. Molly and Wally come in various ethnic versions including African American, Asian, Hispanic and Muslim, and encounter problems common to young children, who become comfortable talking to the puppets about their own issues.

During the small-group time that follows, activities focus on concepts covered in circle time. “If we are working on sharing, for example,” said Webster-Stratton, “children might be given a craft activity that requires glue, and have only one glue bottle among them. They practice the skill of sharing, and we coach. The rest of the day, the teachers look for times when children naturally share in order to encourage it, especially during less structured situations like lunch and playground time.”

The comprehensive curriculum is outlined in teacher manuals and demonstrated on videotape training tapes. It is reinforced through home activities that children complete with their parents, for which they receive prizes such as dinosaur buttons and stickers. Key concepts are presented using pictures, since many children are pre-readers. For example, Wally has a detective kit with cue cards illustrating various solutions to problems. A child with a problem may go to the detective kit to see if a solution card might help him with his issue. Suggested solutions might include talking to the teacher, giving a classmate a hug, sharing, asking to trade, walking away and doing something else, or apologizing.

Academic skills such as pre-reading, reading, writing, science and math activities are interwoven with social/emotional objectives, said Webster-Stratton. “We have developed a matrix of our 300-400 small-group social and emotional activities, delineating which academic skills are also emphasized in each. So many children come to school not ready to learn, and we think you can’t really teach children unless they have social and emotional competence as a foundation for learning. They have to be able to listen and follow directions, cooperate with peers, feel some comfort in the classroom, and have some friends in the classroom to be able to learn to read or write.”

Parenting Clinic staff members meet with parents in the evenings, along with a school-provided leader, usually a teacher or counselor. Childcare and dinner are provided. The emphasis is on positive communication skills, as parents learn ways to increase



Dina Dinosaur is one of the puppets that children interact with during circle time, to work on problem-solving.

their children’s social competence and decrease behavior problems, to set limits effectively, to discipline when needed, and to problem-solve with their children. In the second year of the two-year parent curriculum, problem-solving in the parents’ own lives is added to the training, including how to collaborate with teachers and reduce anger and stress.

Webster-Stratton emphasizes the collaborative nature of the study. “We don’t lecture parents about how they should parent, which I think is why it works so well with multicultural groups who have different traditions and values. Parents and teachers make decisions about their own goals, and they learn

principles to achieve their goals.”

Community-building has been a gratifying outgrowth of the study. “In some parent groups we might have two or three translators. Families with different languages may have had difficulties communicating with each other, but with the translators they have the opportunity to get to know each other and discover they have similar goals and issues. It’s satisfying to see friendships develop. We think this prevention program is a model that could help build a stronger community around the classroom and school.”

Webster-Stratton has a second project that focuses on children in kindergarten and first grade, many of whom are graduates of Head Start programs. Schools picked for the research program serve families demographically similar to those served by Head Start. They are chosen based on the percentage of families served who live in poverty and who speak English as a second language, since such factors increase family stress and the risk of children having social adjustment problems.

While the current research focuses on Seattle, programs based on Webster-Stratton’s six earlier randomized control/treatment studies of children diagnosed with behavior disorders, called the Incredible Years Training Series, have been widely promulgated in other parts of the United States, as well as in Canada, Norway, Sweden, Holland, Britain and Wales. The federal Office of Juvenile Justice Delinquency Prevention has highlighted the series as an exemplary best-practices and “blueprint” program and an empirically validated means of strengthening the family and helping prevent and reverse trends of increasing delinquency and violence.

“Our earlier programs worked with children diagnosed with behavior disorders, and we believe the classroom preventive program is going to be even more effective, because the ‘dose’ of intervention is higher,” said Webster-Stratton. “The children receive the curriculum from teachers several times a week. Not only the aggressive child is learning problem-solving skills, but the shy, withdrawn child is learning how to make friends, and everyone in the class is learning how to respond to the aggressive child. The teacher is building a community somewhat like a family where each individual has different needs and contributions.”

-- Laurie McHale