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Commentary

Can We See It? Can We Stop It? Lessons Learned From Community–University Research Collaborations About Relational Aggression

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The collection of articles in this special issue on relational aggression gives us a glimpse into the complex social networks, first, of children's relational aggression and, second, of the collaborators who develop and validate children's prevention programs. In these descriptions of nascent efforts to create programs that address relational aggression—nonphysical types of aggression, also called *indirect* or *social aggression*—we see how research-based knowledge about children's development and aggression is actively integrated with the wisdom of practice in participatory action models of program development.

The programs described in this special section are among the first to address relational aggression explicitly and to begin to create an evidence base for programs to prevent it (see also Salmivalli, Kaukiainen, & Voeten, 2005). In this commentary, I highlight key questions raised by their approaches to relational aggresssion: Is it a girls'world? Is early adolescence a critical period for intervention? Is relational aggression a result of individual social skill deficits or pathology, or of social norms, or of both? Can we see it? I end by briefly discussing the art and science of program development, evaluation, and dissemination that is so eloquently described in these articles and the benefits of collaborations among researchers, school personnel, and parents for keeping our schools safe for children's healthy development and learning.

Just Girls?

Although publicly accepted, the idea that girls use relational aggression more than boys has been refuted by recent reviews of the international literature (Archer, 2004; Card, Stucky, Sawalani, & Little, 2008; Leff, Waasdorp, & Crick, 2010). Girls do use relational aggression more than physical aggression and more girls report being hurt by relational aggression than do boys. However, boys are also adept at using relational aggression and they do experience its painful consequences. The horrifying stories of young men who were consistently shamed, socially isolated, and humiliated by their peers and went on to kill their teachers and classmates (Garbarino, 1999) give us pause in thinking that girl-only programs will successfully address these concerns. Loss of friendships and social isolation

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are painful for boys, and they may be less likely to disclose their victimization. Moreover, jealousy in romantic relationships can become fodder for relational aggressive acts in middle and high school (Leadbeater, Banister, Ellis, & Yeung, 2008). Gender-differentiated programs that fail to take account of boys and cross-sex relational aggression will also fall short. We need to know more about boys' use of relational aggression. As seen in Leff, Waasdorp, Paakewich et al. (2010) and Verlaan and Turmel (2010), programs that are based on reducing relational aggression in girls only or that use materials with girls doing most of the talking may not reach out adequately to boys.

Is Early Adolescence a Critical Period for Intervention?

It is not surprising that programs in this special series target late elementary and early middle schools and their students. Leff, Waasdorp, and Crick (2010) note that forms of relational aggression evolve in complexity from the overt use of social exclusion by preschoolers to include more varied and subtle expressions in young adolescents. Reviews of the available cross-sectional evidence suggest that social manipulation and ostracism (e.g., alienation, rumors, social exclusion, and rejection) increase as children move from middle childhood into adolescence. Longitudinal studies of the trajectories of social, relational, or indirect aggression are rare, but these also suggest that the use of social aggression increases in early adolescence for both boys and girls (Vaillancourt & Hymel, 2004).

There are many reasons why late elementary and early middle school students may be vulnerable to the harms of relational aggression. They may also be most able to benefit from developmentally sensitive interventions when problems with relational aggression are becoming more prevalent. As the programs here suggest, this is an age when there are enormous advances in children's social skills, including social information processing (particularly cue interpretation, beliefs about aggression, and generating and practicing prosocial actions), empathy and perspective taking, emotional regulation and understanding, anger management, friendship, and leadership. Our own research adds to the substantial literature showing that relationally aggressive children need help to deal with negative or distorted cognitions about peers (Hoglund & Leadbeater, 2007), overestimations of the intentions of their peers to aggress against them (Yeung & Leadbeater, 2007), problems with emotional regulation (Geistbrech, Leadbeater, & MacDonald, in press), and peer victimization (Leadbeater & Hoglund, 2009).

But, when put to use in peer contexts, advances in interpersonal and social information processing skills are not inevitably positive or even neutral in valence (Leadbeater, in press). Children's growing awareness of multiple perspectives, increasing social intelligence, and recognition of their own and others' different emotional responses to the same events can advance interpersonal acceptance and prosocial leadership, but these skills can also provide the understandings needed to manipulate others' emotions and social status. At this age, peer group membership is central to the affirmation of identity and regulation of self-esteem and this fuels a sense of urgency to be included in peer relationships. This interpersonal sensitivity can fuel jealousy, ingroup/outgroup cliques, and imbalances in group status and power. Liking and being liked by one peer can highlight being disliked by or different from another. Peer rejection in this age group can result in painful existential loneliness, or even in depression and suicidal thoughts, Internet abuse, gang membership, and retaliatory aggression.

The programs described in this series include efforts to intervene in peer group support for relational aggression by raising group awareness about it, reducing peer beliefs that support aggressive norms, or by addressing bystander roles that sustain it. For example, Low, Frey, and Brockman (2010) found that victimization rates declined among students in the Steps to Respect intervention groups only when children perceived themselves to be supported by friends. We need to know more about which children (and even which adults) in what circumstances can overcome fears of becoming targeted themselves when intervening on behalf of their peers. Middle school adolescents continue to need proactive assistance from adults to manage the challenges of their high needs for acceptance in the contexts of their new friendships, expanding social networks, and exposure to diverse social norms and widening ecologies.

Individual Pathology, Social Norms, or Both?

Defining targets for intervention efforts also requires that we ask whether relational aggression is a manifestation of individuals' social information processing deficits or pathology confined to a few children who can be targeted through secondary prevention programs (Leff, Waasdorp, Paskewich et al., 2010), or whether it is widespread in children's socioecologies as described by Low et al. (2010) and Verlaan and Turmel (2010). Recent reviews (Leff, Waasdorp, & Crick, 2010, Miller, Brehm, & Whitehouse, 1998; Smith, Schneider, Smith, & Ananiadou, 2004) all point to the advantages of multicomponent programs wherein school staff, parents, and peers together learn about and act against aggression.

Yes, We Can See Relational Aggression and We Can Reduce It

There is considerable agreement across the series' articles about the social behaviors that characterize relational aggression (social exclusion, gossiping, and rumor spreading). In fact, our children are surrounded by widespread cultural and media supports for interpersonal violence. In a recent study, children reported witnessing an average of 50 acts of social, relational, and indirect aggression each week among their peers, and the incidence of these acts on television programs that they watched averaged 319 per week (Coyne Archer, & Eslea, 2006). Reality TV has opened a new world in which relational aggression, put downs, and humiliation by adults and adult judges appear normative. As passive spectators, do teachers and parents become bystanders in supporting this aggression? Adult participation is needed to help young adolescents recognize the harm done by these behaviors. Internet messaging is also a growing site for bullying and victimization, and approaches for managing these concerns need to be added by programs hoping to limit relational aggression (Willard, 2007). If relational victimization in western societies peaks in early adolescence, can we similarly anticipate the need to work to socialize its expression in late elementary and middle school?

Peers, parents, teachers, mental health workers, and even members of children's communities are included in development and delivery of the intervention programs described in this series. Teachers' knowledge, attitudes, and behaviors appear to be particularly important for observing and limiting relational aggression in school settings (Yeung & Leadbeater, 2010). Verlaan and Termel (2010) suggest that more knowledgeable teachers may be better equipped to act to stop victimization, and Low et al. (2010) suggest that variation in teacher implementation of prevention programs, particularly in everyday interchanges, can effect student outcomes.

However, the effects of prevention programs on other contextual influences are rarely assessed and family, school, classroom or neighborhood characteristics that support bullying have been largely overlooked as targets for bullying prevention programs (Hoglund & Leadbeater, 2004). Opening conversations about victimization between children and adults may be particularly important for children to believe that this is a topic that can be discussed. In each of the programs described in this series, active engagement of adults (teachers) and children in discussion, role-plays, and even social action projects (class plans undertaken to improve the school setting) are used to make relational aggression visible, reportable, and repairable. Victims need to know they are not causing their own problems because of personal shortcomings and they need to hear how other children and adults solve these problems when they do occur. The code of silence about relational aggression fueled by fears that children who "rat" or "tattle" or report it will get into more trouble with their peers can be overcome by open discussion and changing class norms and school climates to promote social responsibility and caring for others. Children who ask for help may fear retaliation from peers or be discouraged by adults for "tattling." However, research shows that even young children rarely ask for help that might get others into trouble; they are more likely to be seeking adult support or information to deal with a real problem that they do not know how to solve (Leadbeater, Ohan, & Hoglund, 2006). Adults also need help to understand how to respond proactively to adolescents' aggressive behaviors and how to act on their requests for help.

Resources to open and ground discussions about relational aggression are available in the programs described. We have also begun to assess the feasibility and effects of the extension of the WITS (Walk away, Ignore, Talk, Seek help) primary peer victimization prevention program (Leadbeater, Hoglund, & Woods, 2003, Leadbeater & Sukhawathanakul, 2010). The extension of this program is developmentally appropriate for fourth- to sixth-grade students. Called the WITS Leadership Program or "WITS-LEADS" program, it specifically targets relational victimization (e.g., gossiping, rumor spreading, and social exclusion) and seeks to increase children's understanding of the "internal worlds" of their peers. LEADS stands for *L*ook and *L*isten, *E*xplore points of View, *A*ct, *D*id it work? and *S*eek help. Research to date has supported the feasibility of including the WITS LEADS program in schools that are implementing the WITS primary program. Both WITS programs have online training materials, including an introductory video, accreditation modules for teachers and community leaders, and manuals and lesson plans based on publicly available books about bullying and friendships (see http://www.witsprogams.ca).

Yes, We Can Reduce and Stop Relational Aggression

The research in this series and elsewhere has begun to identify the necessary ingredients of promising programs for addressing relational aggression. *Personal targets* for the prevention of aggression and victimization need to take into account the sensitivities of young adolescents to the regard of their peers. The developmental advances in their social and cognitive sophistication can help children to understand others' internal worlds and the personal and the negative interpersonal consequences of relational aggression, but only in contexts that also promote prosocial (socially responsible) norms. Information about relational aggression also needs to focus on the prevention of social aggression in cyberbullying. *Peer targets* include the need to identify and influence peer beliefs and values about all types of interpersonal aggression; foster bystanders' roles that reduce rather than support aggression; and bring socially competent and less competent children together in cooperative, meaningful, and overt social actions. Parents and nonparent adults need to be involved in positive ways in young peoples' peer networks to promote prosocial norms. *Contextual targets* also include broadening meaningful opportunities for youth to interact in activities that reach across boundaries created by school-based or classroom cliques. These activities can foster social responsibility, nonaggressive norms, opportunities for prosocial leadership, and opportunities for participation with adults in improving their schools, neighborhoods, and communities. As is evident in the Preventing Relational Aggression in Schools Everyday (PRAISE) program (Leff, Waasdorp, Paskewich et al., 2010), even young children can be called on to work together with adults to develop a class plan to promote inclusion and friendships and playground safety. Contexts may also vary by culture and the cultural sensitivity of programs for children from immigrant or aboriginal groups, or from rural or inner city locations needs to be assessed (Leadbeater & Sukhawathanakul, 2010).

Developing and Disseminating Prevention Programs for Children

There is much controversy about what constitutes "evidence." However, prevention science researchers have delineated criteria for the evaluation of the feasibility, efficacy, effectiveness, and widespread dissemination of programs (Flay et al. 2005; Ryan & Smith, 2009). “Scientific knowledge,” as opposed to popular opinion or experience-based practice, is the product of standards of scientific inquiry that seek to produce replicable, valid, and predictable outcomes. The scientific methods appropriate to the development of child health treatments and prevention programs yield scientific knowledge about the safety and effectiveness of these programs. Knowing that a program has a proven effect is desirable, particularly when we want to set priorities for what services should be made publicly available, direct training of health and education service personnel, account for the expenditure of public funds, or purposefully improve health outcomes for children. Disseminating evidence-based prevention programs for children’s programs also presents many challenges for sustaining their fidelity and promoting widespread uptake (Leadbeater 2010).

Prevention science researchers are faced with the reality that vaccination-like, short-term programs do not work. Even widespread, short-term prevention programs directed at improving child knowledge, attitudes, or skills show little evidence of lasting effects. We need longitudinal studies with multiple waves of data to show desired changes in trajectories over time. Pretest and post-test evaluations are adequate for preliminary program evaluations, but these do not give information about children’s development over time. Showing effects for children with the highest scores on a pretest questionnaire may yield exaggerated program effects that are, in part, only reflections of an expected post-test regression of their scores to the mean for their age group. In studies presented here by Low et al., 2010 and Verlaan and Termel 2010, the observed declines for small groups of children involved in aggression may partially reflect this problem. The next steps in these evaluations will need sustained research–community partnerships and collect more waves of data.

The initial success of partnerships for the development of the programs described in the articles in this special section is notable. Each of the programs rests within a network of school-based supporters. Within these participatory action projects, the back-and-forth feedback needed to create research-based, scientifically sound, practical programs can occur. The role of schools that agree to be randomized to potential control conditions is also paramount to the scientific process of establishing an evidence base for programs. It is not possible to attribute positive or negative effects to programs without the valuable participations of these comparison schools.

Clearly, the science of program development and validation requires long-term iterative processes that involve program targets and users at each step. The university–community partnerships described in this special series have created the collaborations needed to continue to work to prevent relational aggression in schools. Their persistence and dedication is remarkable and the promise of these developing programs is apparent. Bringing these articles together in one section hopefully allows them to influence each other. Resources, strategies, and lessons learned from the PRAISE program (Leff, Waasdorp, Pascewich et al., 2010), the Raising Awareness of Relational Aggression Program (Verlaan & Trumel, 2010), the adaptation of Steps to Respect (Low et al., 2010), and the WITS and WITS LEADS Programs (Leadbeater 2008) by and large complement each other in their efforts to reduce relational aggression. As we continue to seek effective strategies for the prevention of problems of aggression in schools, the active participation of school staff and parents is essential. Together we can make a difference in creating responsive school environments where healthy children can grow and learn.

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