

**Addressing Anti-Social Behaviours and Social Development through Schools:  
A Practice Driven, Evidence-based Approach  
Summary of Project**

**Proponent:**

The Canadian Association for School Health is working with Sandra Dean, the originator of the Together We Light the Way - Safe & Caring Schools Program in Durham District School Board, in cooperation with the Safe & Caring Schools Society Alberta, the International Centre for Educational Change (Ontario Institute for Studies in Education, University of Toronto) and the International Centre on Crime Prevention.

**Summary of Proposal**

The Canadian Council on Learning is support the first stage of a knowledge transfer project that will use the experience gained from a practice-driven, evidence-based program (Together We Light the Way) that was implemented successfully in Durham District School Board as well as schools in Manitoba and Nova Scotia.. This stage of the initiative (December 06-June 07) will conclude with a draft analysis of critical features and characteristics of better practices that promote safe, healthy schools and an inventory of evaluated resources. However, this phase will also develop a plan for subsequent stages for a larger diffusion and implementation in the subsequent two years (August 07-March 09)

The anti-social behaviours being addressed in this project include crime, delinquency, bullying and gang behaviours. The development of healthy relationships and positive social development includes the social, emotional and ethical development of young people.

This project will be based on the current practices of professionals, school and agencies to describe how they are integrating the prevention of anti-social behaviours within a broader approach to promoting social development that is part of the social role of the school. In particular, the project will identify what programs and materials are being used by schools, why they are using those tools and how they have integrated those programs into the overall school program. Research about prevention/promotion strategies in social development will be used to illuminate the practical experiences of educators and others. Similarly, knowledge about knowledge transfer and education systems change will be used to explain if and how such innovations are being institutionalized into the school and other systems. (See Appendix Two and References for an indication of the research evidence underlying this proposal.)

This project will be coordinated with similar broad national initiatives in preventing substance abuse, in promoting mental health and in enhancing police-school partnerships. The project will make use of existing knowledge exchange infrastructure in promoting safe and healthy schools that includes a national NGO network, documentation centre and national conference. The project will also be coordinated with other national crime prevention projects and groups such as the Centre of Excellence on Bullying, a regular national forum on bullying and a provincial program on safe & caring schools. The project will benefit from the participation of visiting scholars from Australia as well as office facilities provided by an International Centre for Educational Change at the University of Toronto.

The project outcomes from this initial stage will include:

- The creation of an advisory committee of key stakeholders who will guide the activities in the first stage and develop a detailed plan for the activities in subsequent stages.
- A report developed through dialogue with school boards and others who are implementing safe & caring schools programs in three provinces to determine the extent to which available evidence is being used and, more importantly, what practitioners are using that works (or not) and why. This will include an examination as to how those programs are being institutionalized within the school systems.
- A draft analysis of critical features and characteristics of better/practices that will be based on theoretical models and current practice/use of those models.
- An inventory of local, provincial/territorial, national and international programs, materials and models that will be used in later stages to develop a Compendium of Evaluated Programs/Resources.
- A national network on safe & caring schools, initiated in 2000, will be revived and strengthened.
- The Canadian linkages with an international bullying network and access to that expertise will be strengthened.

## **Work Plan**

1. An Advisory Committee of representatives of the Canadian Council on Learning (CCL, the National Crime Prevention Centre (NCPC) and other officials, project partners, and related experts, researchers and others will be convened. This committee will be asked confirm the overall approach, help to select provinces for investigation, provide advice on project activities and prepare a plan for the subsequent stages of the project. The Committee will meet at least twice by conference call and once in a meeting in Ottawa. The project will be situated at the International Centre for Educational Change at OISE, University of Toronto that will contribute office space and expertise.
2. The Project Director will prepare for the investigation into current practices by identifying leaders within the provinces, establishing processes and tools to gather opinions and current materials and experiences, materials, barriers etc. This activity will develop a plan for round tables discussions with the policy-makers and practitioners in each jurisdiction.
3. The Project Director will conduct round tables discussions in three provinces that will identify and describe current prevention/promotion practices and how they are being integrated into the social role of the school and in the business planning of the school systems. These round tables will involve at least ten key informants in each jurisdiction, including the Safe Schools Coordinator in that jurisdiction. The report on each jurisdiction will frame the results within a draft analysis of critical features and characteristics of better practices, identify programs being used widely in that province, and analyze the capacity of the province to move forward in prevention using a systems-based capacity assessment tool based on a similar tool by the World Health Organization and used by the School Health Research Network in Canada.

4. Building on previous work from recent projects and other sources, an inventory and environment scan of the provinces/territories will be conducted to identify programs and materials that are being widely used as well as contact people in key school districts (early adopters). This inventory will be digitized where possible, and access/ordering procedures will be identified.
5. Questions will be developed and included in a national survey of school policies/programs on substance abuse being done for Health Canada. This survey is planned for the Spring of 2007 and will act as a partial national baseline of selected policies for this project.
6. A session to solicit feedback from an April conference in Ottawa will be planned with Child & Youth Friendly Ottawa. As well planning for a half-day session at the national School Health conference will be done in cooperation with the Canadian Association for School Health. A meeting in Ottawa will be held for this purpose.
7. The National Crime Prevention Centre will review its several school-related projects and provide summaries and contact information. This list of resources will be added to the materials being compiled for the Compendium of Evaluated Resources.
8. The Project Director will collate the data derived from provincial experiences, the input and feedback on the preliminary Matrix of Elements/Key Practices and the list of well—used and accessible resources for the Compendium of Evaluated Resources into a report on this initial stage of the project. This will include a strategic plan and operational budget for moving into the next stages, as well a report on the approaches made to other sources of funding.

## **Appendix One**

### Summary of Together we Light the Way

The *Together We Light The Way* program presents a school-based prevention model of coordinated community-wide interventions to respond to the various needs of children who may engage in future anti-social behaviour. The model supports high quality and consistent nurturing of children, and encourages a secure, physically and emotionally safe environment. Support for *Together We Light The Way* in the Durham District School Board Region has resulted in a school-based crime prevention model ready for implementation/adaptation and evaluation in jurisdictions in other parts of the country.

The project involved collaboration between the Durham District School Board and interested school and community representatives in Nova Scotia and Manitoba. Through this collaboration, a cluster (three) of school communities in each province was identified to implement, adapt and modify the *Together We Light The Way* model, to successfully accommodate socio-cultural differences and expectations. Program implementation involved identifying, in each of the selected school sites, multi-sectoral implementation teams consisting of the school principal, staff members, a police officer, a business partner, a community organization representative, a parent (school community council representative) and a student. Implementation and training plans were developed for each site, and training provided to staffs, parents and local community partners to implement the program.

*Together We Light The Way* focuses on children and youth 4 to 14 years of age. Its main feature is to build resiliency and responsibility in young children and increase protective factors by involving the entire community in working with the children. A key objective of the model is for those involved in the program, school leaders, teachers, parents and the community, to work very closely together to create a common and consistent environment for the children. This approach enhances the success of children by helping them to develop self-worth, self-respect and responsibility and connects them to their communities in meaningful ways.

The program supports the reduction of anti-social tendencies in young children through the delivery of seven interconnected program components that are integrated into the school curriculum. The program components include: *Respect* - teaches students how to respect themselves, and others in the classroom, the local community and the global community; *Circles of Love: Reading Together* - encourages a love of books and reading; *Choice is Yours* - emphasizes the need to make wise, informed and responsible choices, and demonstrates that the positive choices you make have a positive impact on your life; *Triple S* - involves the community in honouring and recognizing students for their accomplishments in scholastics, sports and school activities, and service to their school and their community; *Healthful Happenings* - teaches students the importance of eating nutritious foods, living a healthy lifestyle and how this connects to their learning and well being; *Parent Rap* - facilitates meaningful parental involvement; and *Connections: Classroom and Community* - shows students that what they are learning in school is relevant outside the school.

The project also included: developing a school community audit instrument to allow school communities to assess their strengths and areas for growth and development in preparation for the implementation of the *Together We Light the Way* program; developing the training plans and resources required to assist with further dissemination of the program and developing a process for school communities to establish effective and sustainable partnerships, as a method for securing community involvement and engagement.

**Appendix Two**  
**Selected Research Supporting the Approach Underlying this Project**  
Excerpt from Review of School Prevention of Bullying  
National Crime Prevention Centre, Ottawa, ON  
[http://www.psepc.gc.ca/res/cp/res/bully\\_exec-en.asp](http://www.psepc.gc.ca/res/cp/res/bully_exec-en.asp)

## **2.0 Promising practices**

A review of external information <sup>\*\*</sup>from Canadian and international sources was undertaken to identify promising practices in the field, as well as gaps where further research or analysis is required.

### 2.1 A whole school approach -- A formula for success

Promising practices for anti-bullying interventions have been identified by research experts both within Canada and internationally. According to these studies, successful interventions decrease the amount of bullying in the school by 20 to 70 percent <sup>14</sup>. Most often, interventions work best when part of a systemic, whole school approach in which an anti-bullying policy and anti-bullying initiatives are implemented throughout the school. The whole school approach <sup>\*\*\*</sup> as developed by Olweus (1993) is widely accepted by experts in this field as the most promising approach <sup>15</sup>. The elements of a successful whole school approach are listed below <sup>16</sup> :

A whole school policy:

- includes a needs assessment: this helps determine the parameters and extent of the school's problem before deciding upon an action plan;
- involves multiple stakeholders: the development of the policy in consultation with multiple stakeholders helps ensure commitment to, and respect for, the policy;
- is formally introduced: the anti-bullying message stated in the policy must be understood and consistently enforced by everyone in the school; and
- includes an evaluation: periodic review and modification of the policy is required for it to remain relevant to the school and students.

A whole school anti-bullying initiative:

- is well planned: this plan includes content development, an evaluation framework and a plan for sustainability. The initiative must be tailored to address the distinct needs of a given school.
- involves multiple stakeholders: involvement of community members and organizations increases the initiative's level of success.
- includes students in program development and delivery: this increases the students' sense of commitment to and ownership of the initiative.
- addresses multiple risk and protective factors: the intervention works on several levels to reduce multiple risk factors and reinforce protective factors
- provides age-appropriate materials, discussions and time limits: all elements of the intervention are age-appropriate; they are easily understood by and relevant to the students.
- creates a gender-specific approach: this takes into account the fact that bullying and responses to anti-bullying initiatives can differ between boys and girls.
- intervenes when target behaviour is emerging: intervention occurs early on to ensure anti-social behaviours do not become engrained as the child matures.

- creates a long-term intervention: long-term interventions generally have a stronger, more lasting impact and result in more sustainable initiatives than short-term, quick-fix solutions.

## 2.2 The comprehensive community approach – Communities supporting schools

Research indicates that initiatives involving the broader community may enhance the effectiveness of whole school interventions<sup>17</sup>. A Canadian study of 46 school-based bullying prevention initiatives revealed that the top five successful programs had the following characteristics:

- intervened at three program levels (universal programs, indicated programs and selected programs);
- addressed the attitudes, behaviours, and interpersonal and emotional skills of students;
- involved parents in the initiative; and
- involved the larger community<sup>18</sup>.

By encouraging the involvement of members outside the school community (such as criminal justice professionals, mental health workers), a comprehensive approach ensures that such individuals provide children and youth with consistent messages about how to respond to bullying

### **Selected Studies and Reviews Supporting a Social Development Approach to Preventing Anti-Social Behaviours**

Stewart-Brown, S. (2006) What is the evidence on school health promotion in improving school health or preventing disease and specifically what is the effectiveness of the health promoting schools approach? World Health Organization, Europe, Copenhagen

Abstract:

This synthesis identified good quality systematic reviews that covered mental health, aggressive behaviour, healthy eating, physical activity, substance use and misuse, driver education, and peer approaches. Reviews of programmes that promoted mental health in schools (including preventing violence and aggression) show these programmes to be among the most effective ones in promoting health. Of these programmes, the ones that were most effective were of long duration and high intensity, and involved the whole school. New reviews that focused on promoting healthy eating and physical activity confirmed an earlier review, which found that multifactorial interventions, particularly those involving changes to the school environment, were effective. Four new reviews of programmes that focused on promoting the prevention of substance use confirmed previous findings that these programmes are relatively ineffective. Also, programmes on preventing suicide reduced suicide potential, depression, stress and anger, but less rigorous studies suggested a potential harmful effect in young males. In some (but not all) studies, peer-delivered health promotion was found to be effective, compared with teacher-led interventions, and this approach was highly valued by the young people involved. The systematic review, which evaluated health outcomes of programmes that used elements of the health promoting schools approach, included small studies of variable quality. It found apparent benefits to the social and physical environment of the school, and some studies found the programmes benefited health-related behaviour

(dietary intake and physical fitness). No reviews evaluated the cost– effectiveness of the programmes or interventions.

George C. Patton, Lyndal Bond, John B. Carlin, Lyndal Thomas, Helen Butler, Sara Glover, Richard Catalano, and Glenn Bowes, (2006) “ Promoting social inclusion in schools: A group-randomized trial on student health risk behaviour and well-being, *American Journal of Public Health* September 2006, Vol 96, No. 9 1582-1587

#### Abstract

*Objectives.* We sought to test the efficacy of an intervention that was designed to promote social inclusion and commitment to education, in reducing among students health risk behaviors and improving emotional well-being. *Methods.* The design was a cluster-randomized trial in 25 secondary schools in Victoria, Australia. The subjects were 8th-grade students (aged 13 to 14 y) in 1997 (n=2545) and subsequent 8th-grade students in 1999 (n=2586) and 2001 (n=2463). The main outcomes were recent substance use, antisocial behavior, initiation of sexual intercourse, and depressive symptoms. *Results.* At 4-year follow-up, the prevalence of marked health risk behaviors was approximately 20% in schools in the comparison group and 15% in schools in the intervention group, an overall reduction of 25%. In ordinal logistic regression models a protective effect of intervention was found for a composite measure of health risk behaviors in unadjusted models (odds ratio [OR]= 0.69; 95% confidence interval [CI]= 0.50, 0.95) and adjusted models (OR= 0.71; CI =0.52, 0.97) for potential confounders. There was no evidence of a reduction in depressive symptoms. *Conclusion.* The study provides support for prevention strategies in schools that move beyond health education to promoting positive social environments.

Sandra Jo Wilson and Mark W. Lipsey (2003) The Effects of School-Based Intervention Programs on Aggressive Behavior: A Meta-Analysis *Journal of Consulting and Clinical Psychology* Copyright 2003 by the American Psychological Association, Inc. 2003, Vol. 71, No. 1, 136–149

#### Abstract

Research on the effectiveness of school-based programs for preventing or reducing aggressive behavior was synthesized with a meta-analysis. Changes in aggressive behavior between pretest and posttest were analyzed for developmental patterns and characteristics associated with differential effects. Control groups showed little change in aggressive behavior, but there were significant reductions among intervention groups. Most studies were conducted on demonstration programs; the few studies of routine practice programs showed much smaller effects. Among demonstration programs, positive outcomes were associated with a variety of study, subject, and intervention characteristics. Most notably, higher risk youth showed greater reductions in aggressive behavior, poorly implemented programs produced smaller effects, and different types of programs were generally similar in their effectiveness, other things equal.

Browne, G., Gafni, A., Roberts, J., Byrne, C. and Majumdar, B. (2004) ” Effective/efficient mental health programs for school age children: a synthesis of reviews” *Social Science and Medicine* 58:1367-1384

## Abstract

The prevalence of mental health problems, some of which seem to be occurring among younger cohorts, leads researchers and policy-makers to search for practical solutions to reduce the burden of suffering on children and their families, and the costs to society both immediate and long term. Numerous programs are in place to reduce or alleviate problem behaviour or disorders and/or assist positive youth development. Evaluated results are dispersed throughout the literature. To assess findings and determine common elements of effective children's services, a literature search was undertaken for evidence-based evaluations of non-clinical programs for school-age children. Prescriptive comments aim to inform service-providers, policy-makers and families about best practices for effective services such as: early, long-term intervention including reinforcement, follow-up and an ecological focus with family and community sector involvement; consistent adult staffing; and interactive, non-didactic programming adapted to gender, age and cultural needs. Gaps are identified in our understanding of efficiencies that result from effective programs. Policy implications include the need to develop strategies for intersectoral interventions, including: new financing arrangements to encourage (not penalize) interagency cooperation and, to ensure services reach appropriate segments of the population; replication of best practices; and publicizing information about benefits and cost savings. In many jurisdictions legislative changes could create incentives for services to collaborate on service delivery. Joint decision-making would require intersectoral governance, pooling of some funding, and policy changes to retain savings at the local level. Savings could finance expansion of services for additional youth.

Bram Orobio de Castro, Jan W. Veerman, Willem Koops, Joop D. Bosch, and Heidi J. Monshouwer (2002) Hostile Attribution of Intent and Aggressive Behavior: A Meta-Analysis *Child Development*, May/June 2002, Volume 73, Number 3, Pages 916–934

## Abstract

A meta-analytic review was conducted to explain divergent findings on the relation between children's aggressive behavior and hostile attribution of intent to peers. Forty-one studies with 6,017 participants were included in the analysis. Ten studies concerned representative samples from the general population, 24 studies compared nonaggressive to extremely aggressive nonreferred samples, and 7 studies compared non-referred samples with children referred for aggressive behavior problems. A robust significant association between hostile attribution of intent and aggressive behavior was found. Effect sizes differed considerably between studies. Larger effects were associated with more severe aggressive behavior, rejection by peers as one of the selection criteria, inclusion of 8- to-12-year-old participants, and absence of control for intelligence. Video and picture presentation of stimuli were associated with smaller effect sizes than was audio presentation. Staging of actual social interactions was associated with the largest effects. The importance of understanding moderators of effect size for theory development is stressed.