



Thank you for your Participation!

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We are writing to thank you for your participation in the UB Early Childhood Friendship Project (ECFP). This collaborative project between Buffalo area early childhood schools and the UB Department of Psychology and staff at the Center for Children and Families was a success. We are excited to share this newsletter with you summarizing our year and some of the initial findings from our project. We hope to share additional information with you in the near future on our website (see below for address). We wish to give a particular thank you to all of the

teachers, teaching support staff, directors and principals that made this project possible. In addition, we thank all of the participating families for their support and enthusiasm throughout the project. We look forward to partnering with you again in the near future.

Have a fantastic and safe conclusion to your summer!

Best wishes,

Dr. Jamie M. Ostrov
Project Director

Dr. Greta M. Massetti
Co-Project Director



ENJOY THE WEATHER!

Participating Schools in Amherst, Buffalo & Tonawanda



Thank you to our participating schools in Amherst, Buffalo and Tonawanda.

Both public and private schools participated.

Two schools and six rooms participated last summer dur-

ing our initial pilot study. We conducted two focus groups with several early childhood teachers last summer as well.

We had eight schools and 20 classrooms participate this year in the fall and spring.

We truly thank all of our partners, without whom this project would not have happened.

What were we studying?

Goals and timeline

As you may remember, we conducted anonymous classroom-wide observations and teacher reports of classroom climate in the fall (Time 1) and again in the spring (Time 2). There was about 4 months between the time periods

These assessments were designed to explore how prevalent different social behaviors (both positive

and negative social behaviors) were displayed in the classroom. For example, how com-

mon was physical aggression? How frequent was social exclusion? How often did children in the classroom engage in prosocial or sharing behavior? What kind of friendship skills did children have? What type of play were children engaged in during child directed times? It is our hope that this study will help us modify and further develop a large scale classroom-wide intervention for relational and physical aggression in early childhood. We will continue to analyze our data and post any updates on our website.



100% of children had a friend at school.

65% had many friends.

We are excited to share some preliminary findings

Time 1: According to Teachers:

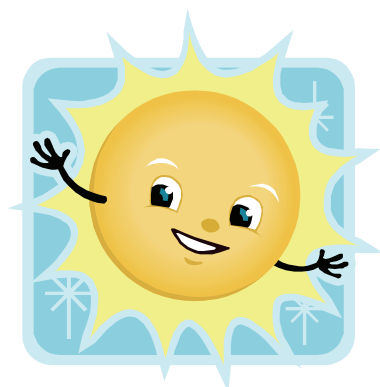
- 100% of children had a peer to play with at school
- 90% have many peers to play with at school.
- 25% of teachers reported that children in their rooms had a special or

best friend.

- 10% of teachers stated that social exclusion was sometimes a problem in the room
- 15% of teachers reported that hitting was sometimes a problem in their classrooms.
- 65% of teachers indicated

that sharing occurred often in their classroom

- 60% reported relational inclusion (i.e., including other children in play) was common.
- 45% of teachers reported that friendship withdrawal threats (e.g., “You are not my friend anymore”) were sometimes common



“You are my friend, Do you want to play?”

- 40% of teachers reported that it was often common to hear a child say: “You are my friend and/or I would like to play with you.”
- Frequent (i.e., many times per hour) hitting of peers occurred only 5% of the time. 35% of teachers

reported that hitting occurred a few days per week in their classroom.

- 15% of teachers reported that saying “You are not my friend anymore” happened a few days per week in their classroom.
- 40% reported that inclu-

sion happens many times per day.

- 25% of teachers reported that children engage in collaborative play many times per hour & 50% reported that this happens many times per day.



“What type of play are children engaged in?”

- 10% of teachers said that children engage in solitary play many times per hour, whereas 40% reported that this never happens.
- 25% of teachers reported that children in their classroom did not have any trouble joining into play with peers many times per hour; 55% were able to do so many times a day.
- 5% of teachers indicated that children had difficulty joining in play effectively.
- 5% of teachers reported that some bullying behavior occurs in their classroom.
- 70% of teachers reported that some children in their classroom prefer to play alone



At Time 2 (spring), 74% of teachers reported that children in their rooms had a best or special friend

“How are the children doing socially and emotionally?”

Time 2: Teacher Data

- 100% of children had a friend at school with 83% having many friends (an increase from time 1)
- 83% have many peers to play with at school. 4% of teachers stated that social exclusion was sometimes a problem in the room (a decrease from time 1)
- 9% of teachers reported that hitting was sometimes a problem in their classrooms (a decrease from time 1)
- 78% of teachers indicated that sharing often occurred in their classroom (an increase from Time 1)
- 83% reported relational inclusion or including other children in play was common (an increase from Time 1)
- 30% of teachers reported that friendship withdrawal threats (e.g., “You are not my friend anymore”) were sometimes common (a decrease from Time 1)



Changes from Time 1 to 2

- 56% of teachers reported that it was often common to hear a child say: “You are my friend and/or I would like to play with you.” (an increase from time 1)
- Teachers indicated that frequent hitting of peers (i.e., many times per hour) occurred 0% of the time (a decrease from time 1)
- 8.7% of teachers reported that hitting occurred a few days per week in their classroom (a decrease from time 1)
- 13% of Teachers reported that saying “You are not my friend anymore” happened a few days per week in their classroom (a decrease from time 1)
- 52% reported that this inclusion happens many times per day (an increase from time 1)
- 35% of teachers reported that children engage in collaborative play many times per hour (an increase from time 1)

What social behaviors are problems in the classroom?

- 30% of teachers reported that children in their classroom did not have any trouble joining into play with peers many times per hour and an additional 61% were able to do so many times a day (an increase from time 1).
- 4% of teachers indicated that children had difficulty joining in play effectively.
- No teachers reported that bullying behavior occurs frequently in their classroom (a decrease from time 1)
- 61% of teachers reported that some children in their classroom prefer to play alone (a decrease from time 1)
- 70% of teachers reported that children are cooperative with peers (an increase)
- 96% of teachers indicated that children are well liked by peers (an increase from time 1)



OBSERVATION DATA (Time 1):

- Boys tended to be more physically aggressive to male peers than were girls
- Boys also tended to exclude male peers more than did girls

Children are cooperative and well liked by peers.

Gender differences?

- Boys interacted with more male peers than did girls, helping to explain these gender specific findings
- Girls were significantly more likely to include other girls in play
- Girls also received significantly more inclusion and other prosocial behavior from other girls than from boys
- Boys were more inclusive of other male peers than were girls
- Girls displayed more prosocial behavior to female peers than did boys.
- Girls received more inclusion and prosocial behavior from female peers than they did from male peers

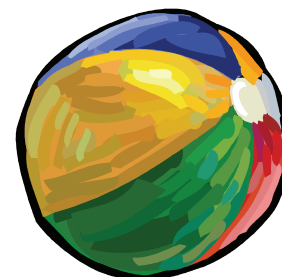
Time 2

Time 1 to 2: The total amount of social inclusion remained significantly stable across the academic year. Moderate levels of association suggest that overall there are similar levels of inclusion across the year. This is the first longitudinal assessment of the stability of relational inclusion.

Children are doing well joining peer groups

Change Across Time:

- Observed physical aggression decreased across time
- Observed peer exclusion decreased across time
- Observed received physical aggression decreased across time
- Observed received peer exclusion decreased across time
- Observed received inclusion increased across time
- Observed collaborative play increased across time



Ask the Developmental Psychologist (Dr. Ostrov)

“What is the typical developmental course of physical aggression?”

In typically developing children physical aggression is more common during the first three years of life than during any other period in development. Typically between 30-36 months a sharp decline in physical aggression occurs and this negative trajectory continues well into middle childhood. Only about 3-5% of the population continues to engage in high levels of physical aggression after the age of 5. Children that engage in high levels of physical aggression, especially after the age of 5, often have impulsivity or behavioral control problems at a greater rate than can be expected for the typically developing child. These children are at risk for future social and psychological problems and likely require a formal evaluation by a qualified mental health provider (see below for a list of local resources).

Local Resources

Child and Adolescent Outpatient Clinic of Women and Children’s Hospital

8th Floor of Millard Filmore Gates Circle Hospital
887-5800 (main number)
Clinic Director: Anne Lockwood, Ph.D.

UB Center for Children and Families (Specialty in ADHD & Behavioral Disorders)

106 Diefendorf Hall, 3435 Main Street, Buffalo, NY
829-2244
Clinic Director: Lisa Burrllows-MacLean, Ph.D.
Center Director: William E. Pelham, Jr., Ph.D.
<http://ccf.buffalo.edu>

UB Psychological Services Center in the Department of Psychology

168 Park Hall, Buffalo, NY 14260
645-3697
Director: Sherilyn Thomas, Ph.D.

Summit Educational Resources (Early Autism Program)

150 Stahl Rd; Getzville, NY 14068
629-3400
Director: Stephen Anderson, Ph.D., BCBA

UB Speech-Language & Hearing Clinic

52 Biomedical Education Building (South Wing)
829-3980
Clinic Director: Susan Roberts, Au.D., CCC-A

**THANK YOU
FOR YOUR
SUPPORT!!!!**



Please visit our website in the near future for updates:

<http://wings.buffalo.edu/psychology/labs/SocialDevLab/home.htm>

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***Ask the Clinical Psychologist (Dr. Massetti)***

“I have a concern about one of my students. He sometimes has angry outbursts and hits himself or one of the adults. He is never aggressive with peers, and in other ways, he is a very kind boy. He has these situations about two or three times a week. His mother says that he used to have them at home until she learned that putting him in front of the TV helps calm him down. Unfortunately, that is not an option at our child care center! We have tried talking to him, and separating him from the group. These strategies help him calm down in the moment, but a day or two later it happens again. What can we do?”

You may already have referred the boy for an evaluation. If not, you should do this. You have also spoken with his mother, which is an excellent idea, as it is critical to develop a partnership with families early on in the process.

Most likely your student does not have a developmental or brain disorder (particularly in the absence of delays in other developmental processes, such as language or socialization with peers). Often angry outbursts are a result of problems with handling frustration and regulating emotions. If the problem has persisted for some time despite your efforts to change your strategies for handling the outbursts, it is a good idea to gather information about the frequency, duration, and setting of events.

Keep a careful diary of the outbursts. In the diary, you should include information such as the time and date, what happened just before the outburst, what he did during the outburst, how long it lasted, how aware he was of what was going on, what was done by others afterward, what he did afterward. After keeping this diary for four or five outbursts, try to analyze what is going on.

You can design a plan around this analysis. You should try it for at least a month, while continuing to maintain the diary, to track progress and response to your plan. If things are improved, even a little bit, celebrate success and keep going. Tweak the plan if you can see how to make it better. It will take several months to solve the problem.

