

PUTTING RESEARCH TO WORK FOR MILITARY FAMILIES

The Development of Conduct Problems and Depressive Symptoms in Early Elementary School Children: The Role of Peer Rejection

Gooren, E. M. J. C., van Lier, P. A. C., Stegge, H., Terwogt, M. M., & Koot, H. M. (2011). *Journal of Clinical Child & Adolescent Psychology*, 40, 245-253.

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This study examined the relationship between conduct problems, peer rejection, and symptoms of depression in early childhood among a group of Dutch children. In this longitudinal study, children were assessed in kindergarten and then 6, 12, and 18 months later. First, the link between conduct problems and depression over time was studied. Then peer rejection was tested as a factor that might influence the link between conduct problems and depression over time. Finally, in addition to the main focus of the project, children were randomly assigned to receive an intervention (or control group) intended to improve child social and emotional competency.

Key Findings:

- For children, conduct problems and depressive symptoms were generally stable across time. In addition, greater conduct
 problems lead to greater depressive symptoms over time, even when controlling for a child's depressive symptoms at the
 previous time period.
- Conduct problems indirectly affect depressive symptoms through peer rejection; specifically, conduct problems lead to greater peer rejection and greater peer rejection leads to more depressive symptoms over time.
- The pattern of results was the same for boys and girls, and there were no differences between children assigned to the control versus intervention group.

Implications for Programs:

- Early-childhood programs may select curriculum that aims to reduce child conduct problems. An effective curriculum that reduces conduct problems may also reduce peer rejection as well as depressive symptoms in children
- In order to reduce depressive symptoms among children, programs can encourage peer inclusion and discourage peer rejection.
- Programs could adopt a "no-exclusion" policy to minimize peer rejection within the program.

Implications for Policies:

- At the school level, using school based health care or counseling systems, policies may be put in place to identify children
 at risk for conduct problems so that interventions can be implemented for these and other children.
- Schools and/or early education programs may choose to train caregivers/teachers in identifying depressive symptoms in children.

Avenues for Future Research:

- Additional studies would be important to determine whether these results would apply to children in other countries or from other cultures.
- Future research should examine whether the relationship between conduct problems, peer rejection, and depressive symptoms found in this study translates to other age groups, such as middle childhood and adolescence.







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Background Information

Methodology:

- Data were collected when children were in kindergarten and subsequently 6, 12, and 18 months after the baseline.
 Longitudinal modeling and latent growth curve modeling were used to examine the relations between these constructs.
- This article focused on civilian children.

Participants:

- 323 children participated in this study, average age was 5.1 years (SD = .37) at baseline; 54% were boys; no socioeconomic information was provided.
- This study was only with Dutch children.
- While not the focus of this article, the PATHS program was randomly provided to children in this study. The PATHS
 program aims to improve child social and emotional competence.

Limitations:

This study made use of complex statistical models; some of the methods used have been questioned by others.
 Specifically, the analyses they chose may over-emphasize the strength of their findings, particularly the finding that peer rejection helps explain the link between conduct problems and depressive symptoms.

Assessing Research that Works

Research Design and Sample				Quality Rating:	***
	Excellent (***)	Appropriate (★★★)	Limited (★★★★)	Questionable (
The design of the study (e.g., research plan, sample, recruitment) used to address the research question was		\boxtimes			
Research Methods				Quality Rating:	
	Excellent (***)	Appropriate (★★★)	Limited (★★★)	Questionable (XXX)	
The research methods (e.g., measurement, analysis) used to answer the research question were			\boxtimes		
Limitations				Quality Rating:	$\rightarrow \rightarrow \rightarrow \rightarrow$
	Excellent Minor Limitations (****)	Appropriate Few Limitations (***)	Limited Several Limitations (★ ★ ★)	Questionable Many/Severe Limitations	
The limitations of this study are		\boxtimes			
Implications				Quality Rating:	\wedge
	Excellent (****)	Appropriate (★★★)	Limited (★★★)	Questionable (****)	
The implications of this research to programs, policies and		\boxtimes			
the field, stated by the authors, are	☐ Not applicable because authors do not discuss implications				
Overall Quality Rating					***

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