

Second Step

Tier 1

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Tier 1 Intervention only

Children who exhibit aggressive and impulsive behaviors during their school years are likely to have poor peer relationships and social skills, demonstrate problems with self-esteem and self-confidence, and be referred for academic underachievement (Taub, 2001). Additionally, youth violence has begun receiving public health attention. Specifically, this public health approach to youth violence involves universal prevention strategies that teach all students social-emotional learning skills to handle challenging situations with their peers, teachers, and in their communities (Espelage, Low, Polanin, & Brown, 2013). Ultimately, prevention of aggression requires teaching and coaching students on alternatives to aggression (Frey, Hirschstein, & Guzzo, 2000).

Incidents of youth violence and the known detrimental outcomes of youth aggression have led to the development of several school-based violence prevention curricula (Taub, 2001). Although a large number of violence prevention programs have been generated and implemented, The Second Step Violence Prevention Program (The Committee for Children, 1986) has garnered a significant amount of research evaluation and is listed on national evidence-based program websites, such as the Substance Abuse and Mental Health Service Administration and Office of Juvenile Justice and Delinquency Prevention (Alvarez & Anderson-Ketchmark, 2009). In particular, the Second Step program is one of the few of its kind used in a preventative manner and is implemented in schools that are experiencing violence and non-violence alike (Taub, 2001). Approximately 32,000 schools in the United States have implemented Second Step since its development in 1986, and roughly eight million students and four million adults have participated in the program (Substance Abuse and Mental Health Services Administration, 2013).

What is Second Step?

Second Step is a social competency-building (i.e., empathy, problem-solving, and impulse control enhancing) violence prevention curriculum developed by The Committee for Children, an American nonprofit organization (Larsen & Samdal, 2007, 2008). The Second Step program is a whole-school approach that specifically aims to prevent or reduce aggression, violence, and substance abuse through the promotion of social and problem-solving skills, perspective taking, anger management, and impulse control that



are linked to interpersonal and academic success (The Committee for Children, 2011a, 2011b; Frey et al., 2000; Taub, 2001). In this way, the program seeks to promote the socio-emotional skills that predict student success in school and in life (The Committee for Children, 2008). The program is available through the Committee for Children in Seattle, Washington and includes primarily classroom-based lessons for students from preschool through middle school. Three separate curricula are available: preschool/kindergarten level, elementary level, and middle school level (Fitzgerald & Van Schoiack Edstrom, 2012).

Second Step is based on the theoretical assumption that social skills deficits underlie and accompany aggressive behavior (Taub, 2001). Second Step was also designed to integrate the theoretical orientations of social learning theory, social-information processing, and cognitive behavioral therapy (Fitzgerald & Van Schoiack Edstrom, 2012). The program is utilized frequently in the United States and Canada and has been adapted for use in Australia, Germany, New Zealand, Norway, and the United Kingdom (Frey et al., 2000). Second Step has also been translated into over a dozen languages (Fitzgerald & Van Schoiack Edstrom, 2012). The content of the lessons is contingent upon grade level and all lessons were created to be developmentally appropriate (Alvarez & Anderson-Ketchmark, 2009).

Second Step Lessons

Individual Second Step lessons are taught through observation, modeling, rehearsal (i.e., skill practice), partner exercises, and feedback (The Committee for Children, 2008; Taub, 2001). By utilizing role-plays and realistic dilemmas, the program aims to generalize newly acquired skills to other domains (e.g., home, after school; Alvarez & Anderson-Ketchmark, 2009). Discussion, behavioral skills training, coaching, and reinforcement are integral to every lesson (Fitzgerald & Van Schoiack Edstrom, 2012). The program consists of 22-28 lessons for each grade level (Fitzgerald & Van Schoiack Edstrom, 2012; Larsen & Samdal, 2007) and can be taught by teachers, counselors, or similarly trained school staff (Frey et al., 2000). Most lessons are 50 minutes and can be delivered in a single session or split between two sessions (Espelage et al., 2013). Teacher training for Second Step is necessary and implementation is recommended at the whole-school level (Larsen & Samdal, 2007) in order to foster a positive school climate and to reinforce positive behaviors throughout the school. Furthermore, the whole-school approach equips all students with a social-emotional vocabulary that can be used and reinforced with all teachers and students (Frey et al., 2000).

Students also perform activities in pairs or in groups in order to practice skills in a supportive environment of peers. The complete curriculum for students in grades K-5 consists of three units of inter-related content - Unit 1: Empathy Training, Unit 2: Impulse Control and Problem Solving, and Unit 3: Anger Management. Each are composed of five to nine lessons (depending on the grade level). Most lessons are taught through in-person instruction. However, several are presented through video (Hart et al., 2009). The program includes four self-regulation skills for learning: focusing attention, listening, using self-talk, and being assertive. Students who possess these skills have been found to have higher academic achievement and are more likely to graduate from high school (The Committee for Children, 2011a). For example, in emotion management lessons students are taught deep breathing, self-talk, and thinking about a situation before responding, rather than reacting impulsively. In the empathy lessons, instructional skills involve identifying feelings, communicating feelings, and looking for feeling clues. Finally, impulse control/problem solving lessons focus on identifying problems, choosing a solution, and evaluating solutions. Specific skills taught across lessons might also include joining group activities, interrupting politely, taking turns, and apologizing (Frey et al., 2000).



Early Childhood Curriculum. Early childhood and elementary school lessons are facilitated through the use of color photo cards of children engaging in social situations (Fitzgerald & Van Schoiack Edstrom, 2012). Each card also has a corresponding story that helps frame the discussion and role-plays. Discussion prompts are listed that aid students in sharing their own experiences and feelings. Lessons include notes for teachers, tips for generalization, and extension activities that are related to children's literature. Lessons for younger children are also accompanied by a video that introduces Second Step to parents and families and encourages their engagement (Frey et al., 2000). There is a Family Guide to Second Step that serves as an adjunct to the video. During the video lessons, parents and caregivers are urged to practice vocabulary that children might learn through Second Step. Parents may choose to take home the video or attend a workshop at their child's school led by the school counselor or social worker.



Elementary Curriculum. For school age children, Second Step draws on developmental research that incorporates a risk and protective factors framework (The Committee for Children, 2011b). For example, classroom lessons for middle school students target protective factors, including social skills, school connectedness, and adoption of conventional norms about substance abuse. Risk factors that are addressed through Second Step lessons include inappropriate classroom behavior (e.g., aggression and impulsivity), favorable attitudes toward problem behaviors (e.g., violence, substance abuse), friendships with others who engage in problem behavior, early initiation of problem behavior, peer rewards for antisocial behavior, and peer rejection (The Committee for Children, 2008). Additionally, this program rests on the foundation that interventions that target core risk and protective factors can simultaneously address multiple skill areas, reducing the need for a separate program for each presenting issue. Similar risk and protective factors have been found to be related to substance abuse, violence, delinquency, and school failure (The Committee for Children, 2008). Above all, the program maintains that good social skills protect youth from becoming involved in substance abuse, violence, and delinquency, and promotes academic success. In addition, developing and maintaining social skills often coincide with positive relationships with school staff and peers. These school relationships foster a sense of school connectedness that has been shown to reduce students' risk of dropping out of school (The Committee for Children, 2008).

Middle School Curriculum. Similarly, five themes (i.e., empathy and communication, bullying prevention, emotion management, problem solving and goal setting, and substance abuse prevention) are integrated into the Second Step curriculum for middle school students. Navigating dating relationships is also discussed (Frey et al., 2000). For example, in lessons addressing empathy and communication skills, students work together to analyze situations in order to understand different perspectives in a social or relationship conflict and practice assertiveness skills

What do We Know about the Second Step Program?

In contrast to punitive discipline strategies, Second Step actually suggests adding teaching and instructional time focused on behavior, rather than reducing it by exclusionary discipline (Fitzgerald & Van Schoiack Edstrom, 2012). Several research studies in recent years have illustrated the effects of Second Step in improving students' social emotional competence and reducing antisocial behaviors, particularly physical aggression (Frey et al., 2000). Overall, teachers report using Second Step in order to enhance their students'

social competencies to develop better social interaction and behavioral skills (Larsen & Samdal, 2007). Specifically, Taub (2001) reported that when the program was implemented in a rural school composed of mostly low-income, Caucasian students, teacher ratings indicated improvements in social competence and decreases in antisocial behavior (e.g., bothering and annoying peers, fighting/arguing with peers) for third through fifth grade students. These gains were not present in similar students at a comparison school that did not receive the intervention. Similarly, behavioral observations corroborated teacher report for the acquisition of prosocial skills (e.g., engaging appropriately with peers, following class directions). However, observations of student behavior did not suggest reductions in negative behaviors. Since it is easier to acquire new behaviors than extinguish habitual maladaptive ones, this raised a question about the influence of Second Step in consistently decreasing negative behaviors.



Image retrieved from the Committee for Children website
Kansas Project Launch at: <http://cfchildren.org/second-step.aspx>

This research gap was undertaken in a large-scale longitudinal, randomized controlled trial (RCT) study conducted by Espelage et al. (2013) in 36 middle schools. The impact of Second Step in reducing negative and maladaptive student behaviors was investigated. Half of the schools received the Second Step intervention in the form of 15 weekly lessons emphasizing empathy, communication, bullying prevention, substance use

prevention, and problem solving. On a series of self-report measures, students in intervention schools reported a 42% decrease in physical aggression over the three-year implementation period. The researchers also gauged students' improvements on a series of other outcomes, such as verbal/relational bullying perpetration, peer victimization, homophobic teasing, and sexual violence and did not find significant intervention effects. These results suggest the effectiveness of Second Step in improving measures of overt behavior, while subtle harmful behaviors may require more intensive interventions or interventions that are longer in duration. Although Second Step does include a family component, interventions that include community elements may also be better designed to target the behaviors of sexual violence and homophobic teasing since these involve larger societal norms (Espelage et al., 2013).

In a recent study, Brown, Jimerson, Dowdy, Gonzalez, and Stewart (2012) found support for program implementation in a diverse sample of preschool through fourth grade English Language Learner children from low income homes. The program demonstrated significant increases in social and emotional knowledge, as well as behavioral and emotional risk following the use of Second Step. Holsen, Smith, and Frey (2008) also conducted a study on the effectiveness of Second Step for fifth and sixth grade students in eleven Norwegian schools. Boys and girls in fifth and sixth grade showed improvements in social competence. Boys in sixth grade also reported reductions in externalizing behavior compared to control students. Despite these positive results, no improvements were reported for internalizing behaviors. Still,

teachers in Norway have indicated that the program had a positive impact on their teaching techniques and the broader social behavior of students. Teachers also reported being more aware of student needs and problems following the implementation of the program (Larsen & Samdal, 2011). These studies highlight the effectiveness of the program in increasing social-emotional awareness and decreasing externalizing behaviors in nontraditional samples of diverse children, which speaks to its utility across audiences.

Similarly, Hart et al. (2009) reported positive results through the use of one unit of the Second Step curriculum, Impulse Control and Problem Solving. The intervention was implemented with third and fourth grade students from two elementary schools. Implementation of one unit resulted in an increase in knowledge of social-emotional skills for third grade students, yet fourth grade students receiving the intervention demonstrated similar social-emotional skill knowledge as control students. Despite this, the investigators noted that fourth grade students still showed considerable growth in skill knowledge from pre-to post-test following intervention implementation. In a large scale investigation of the Second Step curriculum in six elementary schools conducted by Cooke and colleagues (2007), students demonstrated gains in positive-approach coping, caring-cooperative behavior, suppression of aggression, and consideration of others. Yet, the program did not affect students' aggressive antisocial behaviors and office disciplinary referrals did not show any significant changes.

Larsen and Samdal (2008) reported that, in most cases, teachers are the first school staff members to initiate conversations about the adoption of the Second Step curriculum in their school. This emphasizes the important role of teachers as leaders in advocating for the adoption and implementation of Second Step. Moreover, in an investigation of Second Step in Norway, Larsen and Samdal (2007) found that many teachers noted that the program seemed overly structured and repetitive. As a result, many teachers in their sample preferred to adapt the program to the needs of the students in their classroom. In addition, many teachers reported only using portions of the program to handle various issues that arose (e.g., a student presents with anger management problems so the anger management lesson is implemented to deal with the problem at hand), rather than carrying out the program in full (Larsen & Samdal, 2007). Although tailoring the program to individual classrooms decreases fidelity to the intervention as written, many teachers report positive outcomes.



Modifying the curriculum may be especially important in order to serve students with emotional and behavior disorders whose social skills may require more bolstering than students without these disorders (Alvarez & Anderson-Ketchmark, 2009; Fitzgerald & Van Schoiack Edstrom, 2012). Students with disabilities may also benefit from watching their more competent peers role-play and model the skills and language taught during the intervention (Frey et al., 2000). As of now, the Second Step program does not meet the evidence-based standards for students with emotional and behavioral disorders set forth by the What Works Clearinghouse (U.S. Department of Education and Institute of Education Sciences, 2013)), although as noted earlier it is listed on other national evidence-based program websites, such as the Substance Abuse and Mental Health Service Administration and Office of Juvenile Justice and Delinquency Prevention (Alvarez & Anderson-Ketchmark, 2009). Although Second Step has been considered effective for universal prevention, at this time, the What Works Clearinghouse is unable to determine the effectiveness or ineffectiveness of Second Step for students with emotional and behavioral disorders due to the lack of studies specifically focused on this population.

Conclusion. Researchers have shown that Second Step can be an effective program in increasing students' social-emotional knowledge and is also useful with diverse populations. However, studies demonstrating changes in aggressive and/or prosocial behaviors, particularly at the middle school level, may warrant further follow-up. Another concern in the literature stems around the social validity of the

program, as many teachers report altering the intervention to better suit their classrooms. While these alterations decrease the fidelity of the program, teachers have still reported positive results. Finally, although there is promising research regarding the effectiveness of Second Step in building social skills and reducing aggression in older children, there are few studies examining the preschool/kindergarten version of the curriculum (Fitzgerald & Van Schoiack Edstrom, 2012). Future research should also focus on longitudinal outcomes of Second Step over a multi-year implementation schedule, as well as its utility for students with emotional and behavioral disorders.

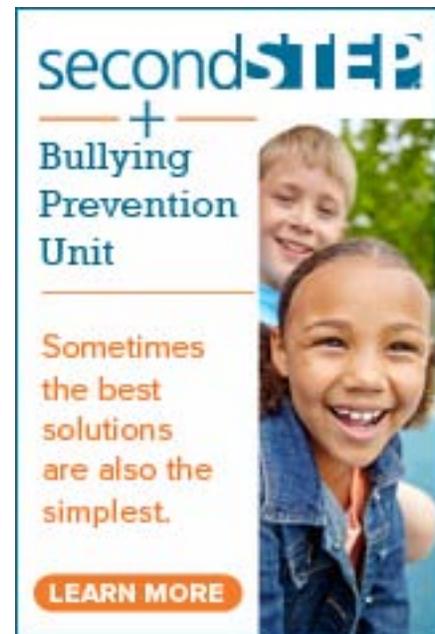
Considerations for Implementing Second Step

Variables that may influence teachers' implementation of Second Step include: organizational issues (e.g., is the program integrated into whole-school policy?), level of teacher training, teacher experience and confidence, the ability to combine Second Step with other social emotional programs, and cultural sensitivity (Larsen & Samdal, 2007). All of these variables, and more, impact teachers' and schools' decisions to implement Second Step, and to what degree. Many other practical considerations also exist. For example, in order to implement Second Step at the school-wide level, all materials must be purchased from the Committee for Children and teachers employing the intervention are highly recommended to attend a two-day training workshop that introduces the curriculum and reviews the developmental principles that support its components (Espelage et al., 2013). Teacher training highlights how to procedurally implement the lessons, but also how to create an environment that facilitates the use of these newly acquired skills (Frey et al., 2000; Larsen & Samdal, 2008).

This workshop costs approximately \$525 dollars per person excluding travel. Many schools employ the "Train the Trainers" model, and elect to send a few personnel to be trained, and in turn, have these staff train other staff at their home school. Onsite training is available if up to 40 individuals at a given school are interested, and ongoing technical assistance is available for schools choosing to implement the program (Alvarez & Anderson-Ketchmark, 2009).

When implementing Second Step, long-term commitments are ideal so that students are exposed to the curriculum each year (Frey et al., 2000), allowing staff to become increasingly familiar with program features. Support from administration is also optimal and principals should also seek out training in order to implement and sustain Second Step at the school level (Larsen & Samdal, 2008). In particular, principals play a key role in organizing conditions within the school to sustain program implementation and evaluation over time.

The Second Step website operated by the Committee for Children (<http://cfchildren.org/second-step.aspx>) incorporates many resources for school personnel who choose to implement the program. Assessment tools are also available that gauge levels of students' social emotional knowledge and attitudes towards aggression (Fitzgerald & Van Schoiack Edstrom, 2012). Since kits vary by grade level, there are different costs associated with each kit. The Pre-K kit (i.e., ages 4-6) costs approximately \$289, the elementary (i.e., grades 1-5) costs approximately \$189, and the middle school kit costs approximately \$299. All materials are also available in Spanish. Given the costs associated with the materials, the Committee for Children website also lists grant funding sources and information that applicants should include in grant proposals (Alvarez & Anderson-Ketchmark, 2009).



Conclusion

Second Step is a social-emotional skills training program that teaches the skills of empathy, problem solving, and anger management to children in preschool through middle school. The program has been implemented extensively since its development and has demonstrated reductions in aggression and acquisition of prosocial skills. Second Step is traditionally delivered as a whole-school approach and requires investment from teachers, administrators, and parents. Even though research on Second Step shows promise for its utility as a universal program, future research should work to investigate the influence of Second Step across age groups and specifically with students with emotional and behavior disorders.



Second Step Resources



The Committee for Children

<http://cfchildren.org/second-step.aspx>

This is the website for the publisher of the Second Step curriculum. The website includes extensive information regarding research, development, advocacy, and funding. Additionally, the website explains how Second Step can be integrated within RTI and PBIS approaches. Example Second Step lesson plans can also be found on this site.

Office of Juvenile Justice and Delinquency Prevention Model Programs Guide

<http://www.ojjdp.gov/MPG/Second%20Step%20%20174;%20A%20Violence%20Prevention%20Curriculum-MPGProgramDetail-422.aspx>

The OJJDP Model Programs Guide aims to assist practitioners and communities in implementing evidence-based prevention and intervention programs for youth and families. The database includes over 200 programs that cover a continuum of services. The Second Step resource describes the intervention units and lessons, as well as examines several evaluation studies of the intervention. It also provides citations for various research studies that have investigated the effectiveness of Second Step.

Substance Abuse and Mental Health Services Administration National Registry of Evidence-based Programs and Practices.

<http://nrepp.samhsa.gov/ViewIntervention.aspx?id=66>

The Substance Abuse and Mental Health Services Administration National Registry of Evidence-based Programs and Practices is an online navigation tool that allows researchers and practitioners to search for summaries and evaluations of over 300 intervention programs. This resource provides an extensive description of Second Step, outlines the quality of research (e.g., outcomes for youth), research dissemination, costs of the program and replication studies.

Recommended Citation:

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