

## LSCI AND AGGRESSION REPLACEMENT TRAINING: A MULTIMODAL APPROACH

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*ABSTRACT: Life Space Crisis Intervention (LSCI) converts a conflict into a meaningful learning experience for the child by discovering what drives his/her behavior and by defining clear outcome goals. LSCI, which has been developed by Nicholas J. Long, Mary M. Wood, and Frank A. Fecser, provides hands-on tools for the educator, clinician, and change agent working with youth whose behavior escalates and is in need of an intervention.*

*Aggression Replacement Training (ART®)<sup>1</sup> teaches youth alternatives to problematic behavior. Developed by Dr. Arnold P. Goldstein from Syracuse University, this evidence-based practice provides competencies to children in Social Skills Training (Skillstreaming), Anger Management (Anger Control Training), and Moral Reasoning. The collaborative use of ART® and LSCI is an effective strategy, specifically in stage five of LSCI, to present youth with new skills needed for necessary behavioral change.*

*Key words: aggression, replacement, training, life, space, crisis, intervention, social skills, anger control, moral reasoning.*

Aggression Replacement Training (ART®), developed by Arnold P. Goldstein of Syracuse University, Barry Glick, and John Gibbs (1998), is a multimodal intervention designed to alter the behavior of chronically aggressive youth. Life Space Crisis Intervention (LSCI), developed by Nicholas J. Long, Mary M. Wood, and Frank A. Fecser, is an effective strategy by which teachers and other professionals working with children and youth can use classroom conflict as a springboard to insight and responsible behavior. The combination of utilizing both ART® and LSCI creates a powerful intervention, whose delivery system has clear and easily understood processes.

When implementing ART® as a primary or secondary prevention, the series stands strong on its own and has a delivery system that needs little support from other psychoeducational theories. However, when utilizing ART® as an intervention strategy, LSCI brings the skills necessary to work with the individuals who are on an out-of-control continuum. The de-escalation, partnering in very effective

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<sup>1</sup> ART® is a registered trademark owned by Dr. Barry Glick.

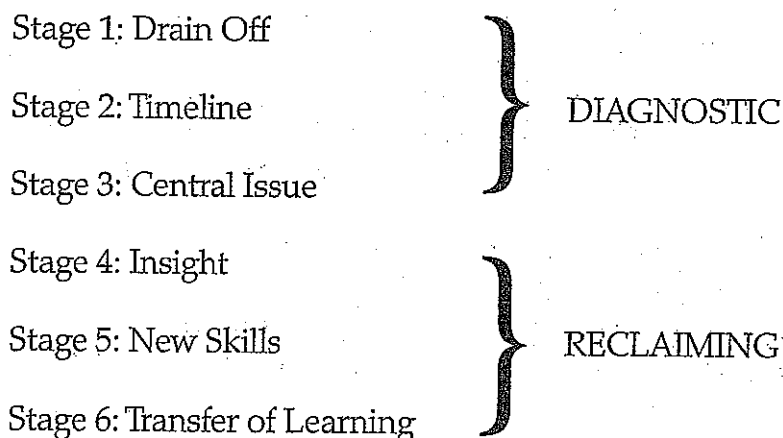
counseling skills found within the six stages of the six-reclaiming interventions, are not found within the ART® model. The LSCI model uses a nonthreatening and extremely respectful approach; ART® teaches the client alternatives to behaviors that trigger the inappropriate or noncompliant situation in the first place. These two theories fit perfectly, from both implementation and facilitation and the client and student perspectives. Both theories are client-centered and assist in exploring possible alternatives and insights into the problematic behaviors. ART® and LSCI attempt to cognitively restructure and challenge belief systems, while providing alternatives and rationales simultaneously. In other words, LSCI provides staff with the de-escalation and interviewing skills, while ART® provides students and clients with very specific prosocial competence.

Jenna is a 13-year-old girl attending a specialized support classroom. She is of normal intelligence, but has had trouble in the past with low self-esteem and impulsive behavior. Jenna longs to have friends, but overreacts to any negative feedback from peers. When away from adults, she gets teased and has a very difficult time handling this negative behavior. Her misbehaviors can quickly escalate and she may become physically aggressive. Jenna enters a classroom where the teacher is on the opposite side of the room. Another student approaches her and makes a negative remark about the clothes she is wearing. Jenna begins to use abusive language towards the other student who then asks the teacher to intervene. When the teacher intervenes, Jenna begins to throw a temper tantrum.

The foregoing situation occurs often in social settings with children and if children are not equipped with the skills to respond to such teasing and agitation, they may act inappropriately.

LSCI (Long, Wood, & Fecser, 2001) helps us conceptualize behavior and then utilizes one of six reclaiming interventions. The authors help us understand that "Students seldom assume responsibility for changing their own behavior (as opposed to relying on outside authority and control for behavioral change) until they are psychologically empowered to make choices be about their behavioral alternatives and are ready to accept the consequences of these choices" (p. 3). This self-regulation of behavior assumes that a child possesses the motivation for change. LSCI provides the mechanism for using the point of crisis as an opportunity of education for skill building.

LSCI is a therapeutic, verbal strategy for intervention with students in crisis. It is conducted at the time the crisis occurs or as soon after as possible. The process uses students' reactions to stressful events to: (a) change behavior, (b) enhance self-esteem, (c) reduce anxiety, and (d) expand an understanding and insight into their own and other's behaviors and feelings. LSCI has six stages:



and six reclaiming interventions:

1. Reality Rub
2. Red Flag
3. Symptom Estrangement
4. Massaging Numb Values
5. Manipulation of Body Boundaries
6. New Tools Intervention

In Jenna's situation, one would utilize the stages of LSCI. At the point of stage five, New Skills, once the student had insight that her behavior was self-defeating, the teacher could then utilize Skillstreaming from ART® and possibly teach the skill "responding to teasing" or "using self-control." The assumption is that the student would understand the LSCI due to staff presentation and also would be participating in Skillstreaming groups, so staff may readily identify which new skill would be necessary for competency development.

Aggression Replacement Training (ART®) developed by Goldstein, Glick, and Gibbs (1998) has positive underlying principles, for example, "that every act of adolescent or child aggression – in school, at home, in the community – has multiple causes, both external and internal to the youth" (p. 33). The authors describe three further interlocking and compounding deficiencies:

- (1) These youths characteristically are weak in or lack many of the personal, interpersonal, and social-cognitive skills that collectively constitute effective prosocial behavior.
- (2) Their frequent impulsiveness and overreliance on aggressive means to meet their daily needs and longer term goals reflect deficiency in anger control.
- (3) With respect to values, such adolescents have been shown to respond at a

more egocentric, concrete, and, in a sense, primitive level of moral reasoning (p. 33).

In Aggression Replacement Training, modeling, role-playing, performance, feedback, and generalization training are keys to the program efficacy. Neuroscience is giving added support to these principles. Daniel Goleman (2006) cites research about the importance of neuroplasticity and social intelligence. Studies of neuroplasticity show the ability of the brain to heal itself after trauma. Recent discoveries also show how one's social interactions play a role in reshaping the brain (Doidge, 2007). Repeated experiences sculpt the size, shape, and number of neurons and their connections. Goldstein's role-playing social skills and reinforcing self-talk fits this brain research.

As a result of this identification of behavioral beliefs, the authors have developed the following three coordinated components:

**Skillstreaming** is a set of procedures designed to enhance prosocial skill levels (Goldstein 1973, 1981). The approach consists of a series of structured learning groups where youth are:

- (1) shown several examples of expert use of the behaviors that constitute the skills in which they are deficient (i.e., modeling);
- (2) given several guided opportunities to practice and rehearse these competent behaviors (i.e., role-playing);
- (3) provided with praise, reinstruction, and related feedback on how well they perform their role-playing enactments (i.e., performance feedback); and
- (4) encouraged to engage in a series of activities designed to increase the chances that skills learned in the training setting will endure and be available when needed in school, home, community, institutional, or other real-world settings (i.e., transfer training).

**Anger Control Training**, the emotional component, was developed by Feindler and her research group (Feindler & Ecton, 1986) at Adelphia University. Anger Control Training teaches trainees what not to do, and youth are trained to respond to provocations through focusing on: (a) triggers, (b) cues, (c) reducers, (d) reminders, (e) use of appropriate Skillstreaming alternatives, and (f) self-evaluation.

**Moral Reasoning Training** is the values component. This has been derived from Lawrence Kohlberg's work with moral development (Kohlberg, 1984) and further developed by John Gibbs of Ohio State University. Youth are exposed to a series of moral dilemmas in a discussion group content, which teach youth moral reasoning to that of the higher level peers in the group (pp. 33-35).

### Recent Evaluations

Two recent studies have evaluated the effectiveness of ART® and yielded promising findings, both proximal to the ART® procedures (i.e., skill acquisition, anger control, enhanced moral reasoning) and distal to procedures but central to the program's ultimate purposes (i.e., reduced reoffenses, enhanced community functioning). Perseus House, Inc., a multisite residential and community-based

provider in Erie, Pennsylvania, conducted a quasiexperimental evaluation for both residential and community-based programming (L. Neal, Nov. 2006). First, the Collaborative Intensive Community Based Program, a residential diversion program, evaluated the effectiveness of ART®, which lasted for 12 weeks, 7 days a week, and was presented to both youths and their parents. Participating youth, all referred by the juvenile court, were assigned to the program on either a deferred placement basis (diversion to the program instead of residential placement) or on a community reintegration basis (following a period of residential placement). Youth ART® sessions were conducted three times per week (1 hour Skillstreaming, 1 hour Anger Control Training, 1 hour Moral Reasoning). Parent sessions were held on Sundays. Compared to pre-ART® status, gain scores revealed significant increases in participant Skillstreaming skills scores, achievement and staff ratings of youth's overall psychological and social functioning (American Psychiatric Association, 1997). Also noted were significant decreases in aggression scores as measured by the Aggression Questionnaire (Aggression Questionnaire, Buss & Perry, 1992).

Secondly, residential programming, which included 76 residential beds, including male and female programming, with average length of stay from 4-16 months, evaluated the effectiveness of ART®, which lasted the entire length of the program. Youth ART® sessions were conducted three times per week (one hour Skillstreaming, one hour Anger Control Training, one hour Moral Reasoning). Compared to pre-ART® status, gain scores revealed significant increases in participant Skillstreaming skills scores, achievement, and staff ratings of youth's overall psychological and social functioning (American Psychiatric Association, 1997). Also noted were significant decreases in aggression scores as measured by the Aggression Questionnaire (Aggression Questionnaire, Buss & Perry, 1992).

Table 1 shows the behavioral gains for the Collaborative Intensive Community Treatment Program. Recidivism rates for 599 individuals, over an 11-year span, tracked one year following the discharge from the program was 18.6%. Youth were contacted by aftercare workers and also included communication with referral sources. The number missing from the total cohort group includes those individuals that could not be located.

Table 2 shows the behavioral gains for the Residential Program. Recidivism rates for 390 individuals, tracked for one year following discharge from the program, was 19.6%. Youth were contacted by aftercare workers and also included communication with referral sources. The number missing from the total cohort group includes those individuals that could not be located.

*Table 1: Behavioral Gains for the Collaborative Intensive Community Treatment Program*

Collaborative Intensive Community Treatment Program	Number of Participants 599	
	Prescores	Postscores
Global Assessment of Functioning	56.5	61.9
Skillstreaming Youth	169.2	182.2
Trainer	143.0	161.3
Parents	156.9	171.6
Aggression Questionnaire	56.0	52.8
Grade Point Average	2.4	2.8

*Table 2: Behavioral Gains for the Residential Program*

Perseus House, Inc. Residential Programming	Number of Participants 390	
	Prescores	Postscores
Global Assessment of Functioning	46.4	52.0
Skillstreaming Youth	169.7	187.8
Trainer	136.6	166.8
Parents	145.6	172.5
Aggression Questionnaire	54.1	51.2
Grade Point Average	2.0	2.8

## Training

We have found that ART® and LSCI have complemented each other. As the LSCI process consists of six stages, the Skillstreaming component of the ART® model is the ideal resource to be tapped for using the fifth stage of LSCI (New Skills). The primary focus of this stage is to teach new skills that lead to more responsible behavior. It becomes increasingly more important to use evidence-based programs. Skillstreaming is the curriculum of prosocial skills for youth and becomes an effective strategy for teaching competencies to youths who are deficient. Therefore, skills from the Skillstreaming curriculum can be integrated easily into the process of LSCI.

Training staff to become effective in utilizing the two theories is not difficult. Theories should be trained separately. The ART® curriculum is designed to allow facilitators to be more flexible and creative and yet focused on a predetermined path and ultimately concerned with program integrity. The theory provides structure and a map for facilitators to follow very specific operational procedures, which makes the program very efficient. The interweaving of New Skills, Anger Control,

and Moral Issues engage clients to acknowledge their feelings and develop empathy skills. Staff develop a foundation and support system to challenge youth's faulty and irrational beliefs. Training staff in LSCI assists with their understanding of why children act the way they do and the effective impact they have when using LSCI.

Once staff are taught Skillstreaming and learn how to use prosocial skills to provide clients with new tools to deal with difficult situations, they are able to readily identify the needs of youth. The role modeling structure of ART® can also be adapted to working with individuals, which is usually the case within LSCI. During LSCI, role-playing can be utilized most effectively in preparing the youth to use a newly learned skill. The youth receives help to plan for resolving the current problem and avoiding defeating repeat behavior in the future.

Staff also receive training in the emotion-oriented component of ART®. While facilitators in the anger control component teach about triggers and cues to anger, anger reducers, and the "angry behavior cycle," LSCI complements this model as it utilizes the "Conflict Cycle." During the first stage of LSCI, the staff, through their understanding of the dynamics of the Conflict Cycle, must avoid engaging in counteraggressive behavior. Knowledge of the Conflict Cycle can next be utilized in stage two to gather information on the Timeline of the event in order to ascertain the central issue in stage three. The staff can then assist the youth to make a connection between their behaviors and feelings in the original stressful event during stage four of the LSCI. Subsequently, in stage five, staff assists youth to anticipate stress, develop and/or reinforce newly learned skills, and prepare for consequences resulting from the incident. As a result, the client or student can respond appropriately in stressful situations. Role-play allows the individual to rehearse the plan that is devised. Rehearsal helps the youth "put the solution into action, to respond to the events and people with new behaviors and new understanding" (p. 9).

Training for ART® is typically a three-day training, which describes its three components. LSCI is a five-day, experiential, hands-on training, which teaches the Timeline and reclaiming interventions. We suggest ongoing training through booster sessions and case staffing. Staff utilization of the models should be reviewed in individual case supervision. (See Supervision Form)

### **Application**

The integration of the two models fit because of their focus on competency development. The following is a suggested application of both models:

1. Aggression Replacement Training Groups: Skillstreaming, Anger Control, and Moral Reasoning are provided at all sites on a weekly basis. Generalization and maintenance are the keys to any successful intervention. Goldstein (1998) suggests the use of a transfer coach (p. 325). This is any person involved in the youth's world, a parent, friend, peer, teacher, staff person, or employer who is in a position to understand and reinforce behavior that the youth is attempting to modify. We encourage any one in the lives of youth to be notified and understand the use of Skillstreaming.

2. LSCI Debriefings: Staff review any LSCI that occurred during the previous week at weekly staff meetings. This gives the team an opportunity to discuss successful alternatives that might be used with a particular child based on his or her needs. This also reinforces the utilization of all reclaiming interventions and allows staff to remain focused on the LSCI theories. If a youth has a specific individualized behavior-treatment plan, this may be modified as a result of the debriefings.
3. The Conflict Cycle: Initially, the client learns about the Conflict Cycle in the weekly Anger Control Group. This Conflict Cycle is utilized with the youth during the LSCI to help illustrate the connections between beliefs, stressful incidents, feelings, behaviors, and adult or peer reactions. Staff may utilize the Conflict Cycle with the youth to explore the Timeline of the event that just occurred. After the Timeline has been confirmed and the conflict identified, the staff determines insight to be promoted by assisting the youth in developing a solution to his or her conflict. The Conflict Cycle is effective in focusing on coping skills around stress. The staff help the youth to look at alternatives to determine which behavioral changes to rehearse and then put into action. Staff may teach new skills and/or reinforce skills learned in the Anger Control Groups to enhance self-control and reduction or management of anger and aggression, which is often found in a Life Space Crisis Intervention. We also utilize Progressive Relaxation, which is helpful as an anger reducer strategy, and encourage self-talk in these sessions that focuses on the ability of youth to deal with provocation.
4. LSCI and ART® Supervision: Staff completes a LSCI and ART® supervision form. He or she discusses implementation of each of the six stages, including which ART® component to use in the New Skill stage. This tool is utilized in individual supervision with the staff supervisor. These may be conducted on a weekly or biweekly basis, but are specifically scheduled and address the training need of each individual staff member.

### SUMMARY

It has become evident that the integration of Life Space Crisis Intervention and Aggression Replacement Training is a powerful multimodal approach to addressing aggressive behavior in youth. Guiding principles when treating youth are focusing on competency development, along with respect and dignity, while holding the young people accountable for their behaviors. We suggest and encourage the continued development of both Life Space Crisis Intervention and Aggression Replacement Training and feel that it is applicable across domain areas to include school, community, and home. If we are to have an impact on the youth of our society, it has become ever so apparent we need to focus on the basic values that LSCI and ART® encompass.



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Time Line: Describe how the process of the Timeline was facilitated & the content found?

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Central Issue: What is the Central Issue in this situation?

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Please circle the type of LSCI reclaiming intervention utilized:

Red Flag   Reality Rub   Massaging Numb Values

New Tools Symptom   Estrangement   Manipulation of Body Boundaries

Insight: How did you utilize the reclaiming intervention to help the student see their pattern of self-defeating behavior?

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New Skill: What A.R.T.® component will help the situation & how did you teach the skill?

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Transfer of Training: How have you prepared the student to reenter the setting?

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L.S.C.I & A.R.T. Supervision Form

Staff Name: \_\_\_\_\_

Site: \_\_\_\_\_

Date: \_\_\_\_\_

What worked very well for you during this intervention?

\_\_\_\_\_  
\_\_\_\_\_

What area was the most problematic and most difficult to implement?

\_\_\_\_\_  
\_\_\_\_\_

Please rate this intervention by circling your choice:

- Was this successful:    Yes    No
- Is the Relationship:    Damaged    Maintained    Improved
- Your own skills:    Need Work    Adequate    Excellent

Did the Client comprehend and learn from this intervention:    Not a lot    Somewhat    Very much

Please Circle the words that describe the students demeanor upon entering your office:

Angry    Defiant    Scared    Aggressive    Remorseful    Oppositional  
Sarcastic    Happy    Nervous    Challenging    \_\_\_\_\_

Drain Off: What did you implement to accomplish this stage?

\_\_\_\_\_  
\_\_\_\_\_