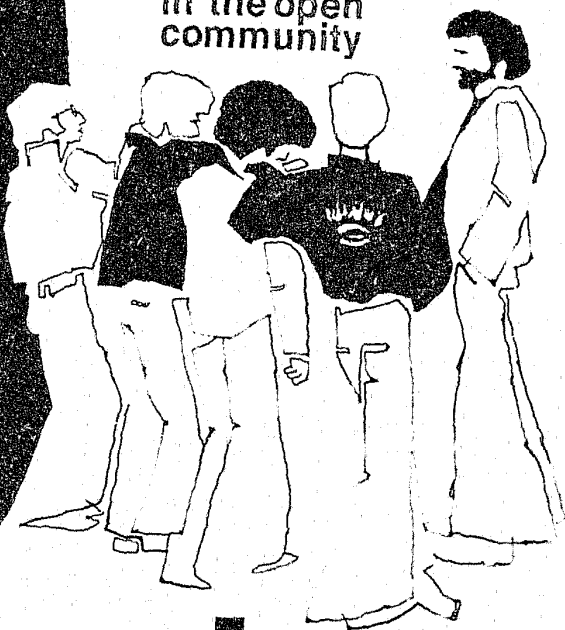


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# THE ST LOUIS EXPERIMENT

treating  
antisocial children  
in the open  
community



**Research Report-3**  
NATIONAL INSTITUTE OF MENTAL HEALTH

The Center for Studies of Crime and Delinquency of the National Institute of Mental Health is interested in making available information gained from its research programs.

*Research Report 3* is the third in a series of fliers designed to disseminate information to researchers, program administrators, and others who are involved in the fields of crime and delinquency and mental health.

The *Reports* provide brief descriptions of research projects supported by the Center and include the names and addresses of the researchers to help expedite the flow of information between researchers and research-users.

### **Research Report-3**

**CENTER FOR STUDIES OF CRIME AND DELINQUENCY**

NATIONAL INSTITUTE OF MENTAL HEALTH



# who, what, where

The St. Louis Experiment is a service-research program for anti-social boys 8 to 16 years old. Over a period of 3 years, more than 300 such boys have been referred to the program—primarily by juvenile court workers, school guidance counselors, and psychologists and social workers in varied public and private therapeutic agencies—because of frequent fights with other boys or adults, uncontrollable tantrums, vandalism, truancy, theft, and similar behavior.

The program does not take place at "traditional" treatment or rehabilitative agencies such as correctional institutions, residential treatment centers, halfway houses, juvenile courts, or family service agencies. Instead, it is conducted at a community center in a large metropolitan area (The Jewish Community Centers Association, St. Louis, Missouri). Unlike many other rehabilitation programs for antisocial youth, treatment takes place primarily while the boys live in the open community and—more importantly—engage in group activities with other boys their own age who have displayed little or no chronic antisocial behavior. Therapy usually lasts 7 to 8 months, and a new group of referred boys is enrolled each year.

## group treatment with peers

Two group treatment methods were studied. First was traditional social-group work, as taught by many contemporary graduate schools of social work. The second was group-level behavior modification, in which most of the leader's efforts are oriented toward the group as a whole rather than toward any individual members. In addition, to contrast the effects of the two treatment methods, about one-third of the boys met in groups that received no systematic treatment. Regardless of the particular method used, all the young people participated in typical community center activities such as arts and crafts, athletics, hikes and trips, and discussions.

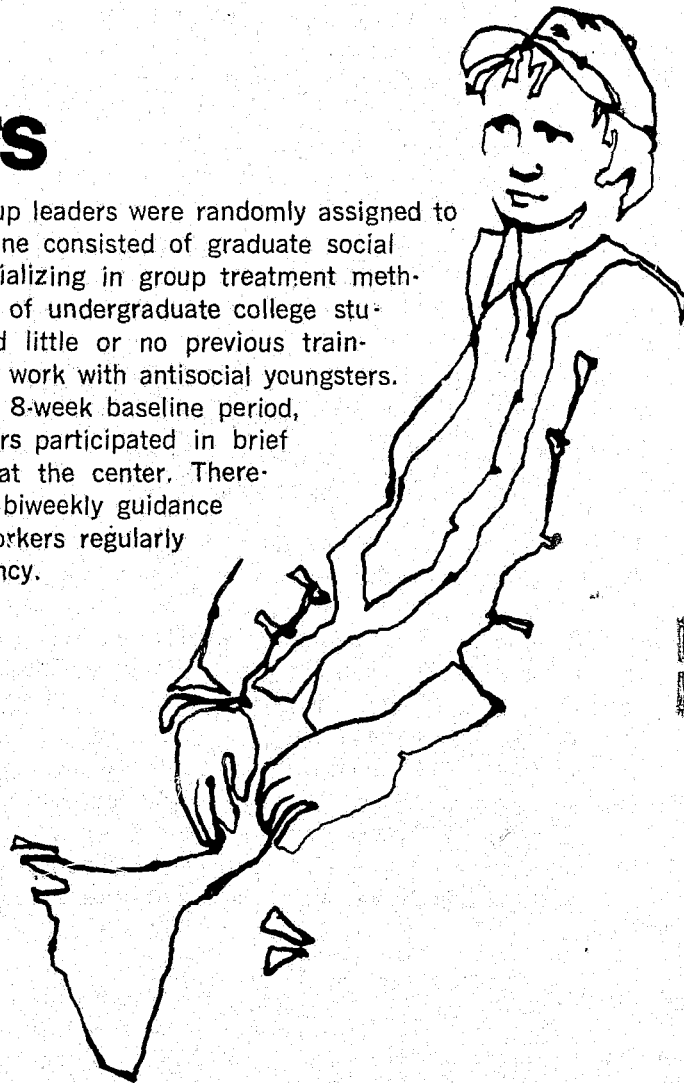
Most of the referred boys were assigned to treatment groups composed solely of other referred antisocial boys, but about 10

percent were assigned to regular youth groups at the center. Usually only one referred boy was assigned to a youth group of 6 to 12 "prosocial" boys. Group treatment was thus provided while the referred boy interacted with boys who had displayed little or no previous antisocial behavior. This is unlike the usual adolescent group therapeutic situation, in which referred youth interact only with similarly troubled peers. Finally, to further compare boys' behavior in the groups mentioned, a third category of group was studied—that with no referred antisocial boys. Thus, in addition to the 300 referred boys, 1,200 nonreferred boys participated in the program during the 3-year study.

## group leaders

Two kinds of group leaders were randomly assigned to the boys' groups. One consisted of graduate social work students specializing in group treatment methods, and the other of undergraduate college students who had had little or no previous training for therapeutic work with antisocial youngsters.

Following a 6- to 8-week baseline period, both types of leaders participated in brief in-service training at the center. Thereafter they received biweekly guidance from staff social workers regularly employed by the agency.



## methods of evaluation

To evaluate behavioral changes in the boys over the 7-month period, comparable data were collected from referring agents, the boy's parents, group leaders, and the boys themselves. This information consisted of frequency estimates of prosocial, nonsocial, and antisocial behavior by the children over a 1-week period. The inventories were completed both before and after the treatment program and also 1 year after the treatment ended. The boys also completed subscales of an inventory designed to measure manifest aggression and social maladjustment. Finally, to obtain exact measures of behavioral change, nonparticipant observers attended all group meetings. They recorded proportionate changes in each boy's prosocial, nonsocial, and antisocial behavior at each meeting using a systematic time-sampling procedure.

## goals

A major objective of the program was to ascertain the extent to which typical community agencies can deliver effective group treatment services without, at the same time, making major changes in their usual staffing or operating patterns. Another important goal was to examine the actual effects of such group treatment on both the referred and the unreferred boys who took part in them. In particular, the program aimed at gradually diminishing the frequency of each boy's antisocial behavior and, ultimately, enabling him to stabilize any behavioral changes in the open community so that his incidence of antisocial behavior would not be significantly different from that of prosocial boys.

## rationales

The reasons for treating antisocial children among prosocial peers are many. In part, it is assumed that treatment takes place in a group context relatively devoid of antisocial or deviant role

models and reinforcement patterns. The probability of stigma is also reduced since treatment occurs in a community center and among relatively prosocial peers, and this tends to enhance the possibilities of effective treatment and sustained behavioral changes after release from the program. Because treatment takes place in the open community, there is also a greater likelihood that resulting behavioral changes will be readily transferred to, and stabilized within, the open community. Finally, the actual financial cost of treatment is significantly less than the costs for other types of treatment programs in either correctional institutions or the open community.

## results of the programs

The program's results must be regarded as tentative since they are still being evaluated, but some clear trends are discernible from a review of 2-years' data.



## referred boys

In general, the referred boys, their parents, and the referring agents reported that most of the boys improved considerably as a result of the program. Yet, weekly behavioral observations of the boys revealed relatively little behavioral change in one direction or the other and few variations according to type of treatment method or leader training.

More important, perhaps, the weekly behavioral observations did show that referred boys who were treated among prosocial peers showed considerably less antisocial behavior than did their counterparts who were treated among antisocial peers. The former boys in fact showed even lower incidences of antisocial behavior than did the nonreferred boys. In contrast, referred boys who were treated among antisocial peers consistently displayed more antisocial behavior than did any of the other categories of children. These trends were confirmed by independent estimates of the nonparticipant observers and also by the boy's own estimates of their behavior. The data also show that the referred boys readily developed friendships in the prosocial groups that were usually indistinguishable from the friendship patterns of their prosocial peers.

## nonreferred boys

The effects of the program on the prosocial participants are especially interesting, primarily because they were largely negligible. Almost all the preliminary information indicates that prosocial boys in groups with referred boys showed no increase in antisocial behavior. In contrast, their behavior was somewhat less antisocial than that among boys in purely prosocial groups.

The researcher, Dr. Ronald A. Feldman, has prepared resource materials and preliminary reports which describe central facets of the program. These can be obtained by writing to:

Dr. Ronald A. Feldman  
Center for the Study of Youth Development,  
Boys Town, Nebraska 68010

**END**

