Introduction
Chapter 2 provides an overview of the current knowledge on the effectiveness of treatments for childhood aggression and its moderators. In Chapter 2, we present a literature synthesis of 72 meta-analyses and systematic reviews on the effectiveness of psychosocial treatments for childhood aggression. This study provides an indication of some overall treatment effectiveness and moderators that might explain some of the differences in treatment effectiveness and outcomes under which circumstances.

For early prevention, however, it would also be useful to develop behavioral problems in children at risk for developing a more aggressive behavior. For both general and environmental factors, it is important to understand the possible interactions between them. Therefore, in the current chapter, we provide a comprehensive understanding of the ABCD framework (Sameroff, 2010), that acknowledges the importance of both familial and environmental factors. In particular, the ABCD framework suggests that children growing up in more disadvantageous environments are more likely to experience and react to stressors in problematic ways.

In the current chapter, we focus on the role of genetic factors in childhood aggression. This chapter covers the genetic factors that contribute to childhood aggression and how these factors might be related to family functioning and environmental factors. In particular, we discuss genetic factors that contribute to aggression, including those related to anxiety, depression, and antisocial behavior. We also discuss how these genetic factors might interact with environmental factors to influence aggression.

In conclusion, the current chapter provides an overview of the current knowledge on the effectiveness of treatments for childhood aggression and its moderators. In future research, it is important to consider the role of genetic factors in childhood aggression and how these factors might interact with environmental factors to influence aggression. This will help to better understand the complex interplay between genetic and environmental factors in the development of childhood aggression.
First, focusing on the country level, Chapter 3 examines the association between adolescent aggression and behavior and mental health in 30 European countries. The data are from the 2013/2014 Health Behaviour in School-Aged Children (HBSC) study, which includes 372,539 eleven- to fifteen-year-olds from 30 European countries (Curti et al., 2014, 2012). To assess the association between adolescent aggression and behavior and mental health, we used age-standardized prevalence rates for each country. The outcome is a composite measure of adolescent aggression and behavior (commonly referred to as "risk behaviors"), which is composed of multiple indicators, including physical and emotional aggression, substance use, and risky sexual behavior. The predictor is the score on the adolescent aggression and behavior scale, which includes subscales for physical aggression, emotional aggression, and substance use.

Second, after a focus on country-level associations, Chapter 4 focuses on a smaller sample of countries, and in particular, the Netherlands. The study was conducted in 2013, and data were collected from 6227 children aged 11-16 years. The main goal was to examine whether the association between adolescent aggression and behavior and mental health varies across countries. The study included adolescents from 11-16 years of age, and the outcome was a composite measure of adolescent aggression and behavior (commonly referred to as "risk behaviors"), which is composed of multiple indicators, including physical and emotional aggression, substance use, and risky sexual behavior. The predictor is the score on the adolescent aggression and behavior scale, which includes subscales for physical aggression, emotional aggression, and substance use.