

childPSYCH News

A newsletter for professionals and parents

Inside this issue:

| | |
|---|---|
| To Repeat or Not to Repeat? | 1 |
| Child-Friendly Cognitive Behavioural Therapy | 2 |
| Self-Management Training for Behavioural Problems | 2 |

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To Repeat or Not to Repeat?

Feature article by Philip Gosschalk MAPS, Principal Psychologist of *childpsych*

The decision to repeat a child in school is complex. It depends upon many issues such as the child's learning readiness, emotional maturity, age, whether they have a learning difficulty or developmental delay and so on.

The research on whether repeating grades benefits children is still largely inconclusive. However, every year parents and teachers are forced to make this decision.

What is learning readiness?

Often educators will talk about learning readiness. Learning readiness is a broad term that refers to the child's mental and emotional capability to take on more formal learning. For example, the ability to be independent (i.e., be toilet trained, feed one self etc), regulates one emotions (i.e., control anger, fear), sustain attention, understand concepts such as "bigger" and "smaller", and to have basic cognitive skills such as appropriate fine motor skills (as needed in cutting and holding a pencil).

How is learning readiness assessed?

Learning readiness assessments are generally done by a psychologist with an education background. At *childpsych* our learning readiness assessments involve cognitive testing, evaluation of pre-academic skills (e.g., does the child understand that letters have sounds), use of specialised

questionnaires and interviews with the parents and teachers about the child's emotional development.



The research on whether repeating grades benefits children is still...inconclusive

What does the research say?

A recent Australian study found that repeating school seemed to have some emotional benefit for children. However, whether it benefited children academically was unclear. American research suggests that repeating grades is not beneficial and can be harmful in some cases with some children performing academically worse the following year.

Learning delay or learning disability?

At *childpsych* the first thing we determine is whether the child is likely to have a learning *disability* or learning *delay*. This is a very important question to answer as a learning delay means the child is slow to learn possibly because of a delay in their development and therefore they may benefit from repeating

school. If they have a learning disability, then repeating is unlikely to help as this is a more permanent problem and one they may not "grow out of" by simply repeating another year. Cognitive assessments measuring memory, attention and so on are undertaken to examine this issue.

Certainly if the child has a learning disability then repeating may give the sense of benefiting but when the child moves to the new grade the following year they fall behind again.

Emotional maturity

The second area of evaluation is emotional maturity. Often parents and teachers will confuse a mental health problem with emotional maturity. For example, if a child has an anxiety disorder such as being overly anxious (e.g., crying when there are changes in routine), they may be seen as being "immature". However this is potentially a disastrous mistake to make. First the child's anxiety disorder must be treated. In my experience, treating the anxiety results in a different, more confident child. Second, failure to treat this problem can worsen their anxiety, or if the anxiety eventually subsides the child will have what's called residual symptoms where they are still a little on the anxious side. This is similar to a smouldering fire waiting to erupt again.

Emotional immaturity is

Continue over...

CHILDPSYCH:PSYCHOLOGY PRACTICE

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To repeat or not to repeat? con't

more than just being a little anxious, it is the child's strong need to play rather than learn more about the world. When children have an eagerness to learn and ask a lot of questions and play interactively, then we can begin to see them as socially mature.

Some researchers argue that keeping children back to encourage their social development doesn't make sense as they are being kept back with younger children! These researchers argue that children grow up when they are with their age group. This is called “peer modelling” or “leading by example” in lay persons terms. There are of course some other factors that need to be taken into account. If the child has a late birthday, such as being born in December, then they may benefit from repeating with a younger age group.

Making a decision

The best way to make a decision is for parents and teachers to discuss the possibility of the child repeating in late Term 2. A second meeting can be held in Late Term 3 to review the child's progress. If there are continued concerns then a more formal psychological/learning readiness assessment can be requested in Term 4. The assessment results can be used to make a decision about repeating.

Child-Friendly Cognitive Behaviour Therapy

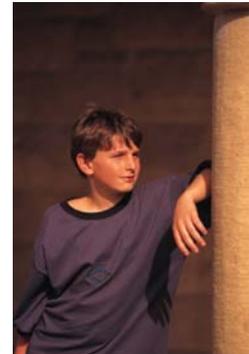
There are many therapeutic approaches available to assist children and their families with problems such as anxiety, depression and behavioural problems.

Cognitive-behavioural therapy (CBT) is one approach that has received a lot of research support. CBT is a combination of Behaviour Therapy and Cognitive Therapy.

Behaviour Therapy is based on the premise that our behaviour is driven by the desire for reward or avoidance of punishment. For example, we work harder to earn more money and to avoid losing our jobs. Cognitive Therapy believes that it is how we think about things that *influences* how we feel and behave. For example, if we have negative thoughts about our ability to drive safely, we will feel anxious and as a result may veer across the road and so on.

CBT therefore is the combination of both these theoretical perspectives. Techniques such as “positive reinforcing”, “confronting your fears gradually” and “rational thinking” are commonly used. With children, CBT needs to be child-friendly. This means that the principles of CBT are applied through such approaches as play therapy, use of board games, role plays, drawings, parent training and so on. Many children enjoy CBT.

CBT is the recommended treatment of choice for many childhood difficulties such as



anxiety, behavioural problems and mood problems according to the Society of Clinical Child & Adolescent Psychology. There are other therapies that are also of use. For example, Interpersonal Therapy is useful with adolescents suffering depression. In reality most psychologists working with children use a variety of approaches. However, only those approaches that have research support are used. This is called “evidence-based therapies” and is the guiding principle at *childpsych*.

A typical treatment program for a child with Separation Anxiety will involve; a gradual return to school (see *childPSYCH News Vol 1 Term 1 2006*), teaching of relaxation, teaching the child about anxiety and how to identify when they are anxious, how to use positive self-talk, use of rewards for motivation and parent training (see *childPSYCH News Vol 1 Term 3 2006*).

Self-Management Training for Behaviour Problems



Self-Management Training (SMT) is a non-drug

approach to manage children's behavioural problems. SMT benefits children who has been diagnosed with conditions such as AD/HD as well as children who are having behavioural problems. It's success depends on a number of factors and it may not be completely successful for

all children.

SMT is used regularly at *childpsych* for children with behavioural difficulties. Usually, the first few sessions are spent on what's called “emotional competence”. Emotional competence is giving children an awareness of their feelings and emotions in order to promote better self control. In it's simplest form, SMT requires children to monitor their own behaviour

over the course of a day by completing a monitoring sheet. Children give themselves a score out of 2 for how well they managed certain behaviours (e.g., such as keeping still, not calling out). The teacher or parent then assigns a score also. Usually the sheet is completed every hour. This provides the child with regular feedback about their behaviour. Rewards are then given for improved self-control.


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helping families and
children to move forward