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The Effect of You Can Do It! Education on the Emotional Resilience of Primary School Students with Social, Emotional, Behavioural and Achievement Challenges

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Abstract

This study examined the effect of the You Can Do It! Education (YCDI) cognitive-behavioural intervention program on the emotional resilience of students in grades 4 to 6 who were identified with achievement, behavioural, social and/or emotional challenges. 61 students were randomly assigned to either small groups receiving an eight week YCDI cognitivebehavioural intervention or small groups receiving "eclectic" counselling other than cognitivebehavioural. Results indicated a positive impact of the YCDI program on the resilience items contained in the ACER Social and Emotional Well-Being Surveys (student self-report; teacher survey) with no positive impact found for students receiving "eclectic" counselling. Results are discussed in terms of the need for social and emotional learning programs that explicitly teach emotional resilience skills.

Children of all ages face situations on a daily basis that can evoke negative feelings of anger, anxiety and sadness. The failure to develop age-appropriate emotional control for regulating intense emotional states is associated with the development of behaviour problems in children and can lead to a variety of psychopathologies such as character disorders, anxieties and phobias, psychotic symptoms, depression, bipolar disorder, conduct disorder with aggression, drug and alcohol abuse, and obsessivecompulsive disorders (e.g., Chandler & Shermis, 1985; Landy, 2002).

Regulation of emotion is a construct that researchers have been interested in for many years (e.g., Brenner & Salovey, 1997; Jersild & Meigs, 1943). However, it has only been since the early 1960s that cognitively-oriented behavioural researchers began to examine the extent to which human behaviour is moderated by thought processes and associated emotional states. Specific attention has been directed in child developmental research on the extent to which children are able to moderate their emotions and behaviours when faced with stressful events. The construct of emotional resilience is sometimes called emotional or affect regulation.

Although there are many studies that conceptualize how children cope with adversity (e.g., Altshuler & Ruble, 1989; Band & Weisz, 1988), there have not been extensive studies of intervention strategies designed to teach students different cognitive and behavioural coping skills for managing emotions. Some studies of the impact of emotional regulation programs include children who participated in coping skill-building programs. In these cognitive-behavioural studies, children demonstrated more internal locus of control, higher self-concept, and higher levels of confidence (Henderson, Kelbey, & Engebretson, 1992), revealed lower levels of stress when faced with adverse circumstances (Treiber, 1985), showed an increase in the number and improvement in the quality of coping strategies generated and increased performance on subtests of IQ measures (Stevens & Pihl, 1983), and manifested lower levels of anxiety (LaMontagne, 1985). and exhibited fewer maladaptive behaviours when Adolescents who participated in coping skill-building programs showed significant reductions in anxiety, anger, and depression levels (e.g., Hains, 1994), and an increase in their use of adaptive cognitive coping strategies (DeAnda, 1998).

You Can Do It! Education (YCDI) (Bernard, 2004b, 2006a, 2006b, 2007) is a cognitive-behavioural, socialemotional learning approach based on the cognitivebehavioural theory and practice of Albert Ellis, Richard Lazarus, Donald Meichenbaum, Martin Seligman and other researchers who have highlighted the role of positive/negative, rational/irrational attitudes and thinking in children's learning and well-being. Bernard (2006a) described five core social and emotional competences (confidence, persistence, organisation, getting along and emotional resilience) along with 12 contrasting positive and negative Habits of the Mind that block or contribute to social and emotional competence including: selfacceptance vs. self-downing, optimism vs. pessimism, internal locus of control vs. external locus of control, high frustration tolerance vs. low frustration tolerance, thinking before you act vs. acting without thinking, tolerance of others vs. intolerance of others.

Bernard (2004a) defined emotional resilience as being able to stay calm, control one's aggressive and withdrawal behaviour, and calm down in an appropriate period of time when faced with challenging tasks or difficult people. Based on a review of available research, Bernard and Pires (2006) identified different, rational ways to think and coping skills (e.g., talking to someone, physical exercise, finding something fun to do) that children acquire developmentally that can be taught to children and adolescents. Bernard (2007) has constructed an array of different activities for teaching children of different ages about the characteristics of resilient and non-resilient young people of their age as well as rational ways to think and coping skills to strengthen their resilience which are published in *Program Achieve: A Social and Emotional Learning Curriculum* (Bernard, 2007).

Purpose of Study

The purpose of this study was to evaluate the impact of a cognitive-behavioural program based on Bernard's (2004a) conception of emotional resilience and derivative activities found in the You Can Do It! Education curriculum *Program Achieve* when presented in once-a-week small group counselling sessions to students with social, emotional, behaviour and/or achievement problems.

In order to control for the positive, confounding effects of seeing a mental health practitioner, students who were identified with academic, social and/or emotional difficulties were randomly assigned to either receive the YCDI intervention or a comparison "treatment" control group where they received non cognitive-behavioural counselling (e.g., relationship counselling, play therapy) from an experienced school counselor employed by the school district.

Method

Participants

All participants were enrolled in two primary schools in the District of Centralia, located in Southern California, USA. Participants were not randomly selected from the whole schools' population. Rather, 547 fourth, fifth and sixth grade students were rated by their teachers on the Student Social Emotional Behavioural Functioning (Bernard, 2006c), an eight-item screening Survey instrument that measures teacher perceptions of four types of student adjustment problems (two items for each type): educational under-achievement, social problems, behavioural problems, and emotional problems. On the 5point Likert scale, a rating of 5 meant that the student "almost always" displayed a particular problem behaviour and a rating of 1 meant that the student "almost never" displayed the problem. Sixty-one fourth, fifth and sixth grade students, ranging in age from 9 to 12 years were designated as having significantly low levels of social emotional well-being and/or significantly high levels of underachievement as measured by the screening survey.

The 61 students selected to receive counselling services from school counsellors were then randomly assigned to either the experimental group ("YCDI cognitivebehavioural intervention") or the control group ("eclectic counselling"). Thirty students were invited to receive eight weeks of YCDI cognitive-behavioural training while the other 31 students were invited to receive eight weeks of counselling sessions that were delivered by licensed school counsellors who adopt eclectic approaches to counselling. The students in the experimental group were randomly assigned to one of four groups of between five

to seven students conducted by the same group leader while students in the control group were randomly assigned to one of four counselling groups that were conducted by four different school counsellors. The initial sample consisted of those students who turned in their signed consent forms, a total of 27 students in the experimental group and 31 in the control group. However, the final sample consisted of 22 students in the experimental group and 30 in the control group, mainly due to students moving to different schools or school districts and to the fact that one of the students in the experimental group decided to stop participating. The students who moved away from school during the conduct of the research or stopped participating were not included in the final analysis. The experimental group consisted of 12 boys and 10 girls and the control groups consisted of 16 boys and 14 girls. The ethnic composition of the sample was 50% Hispanic/Latino, 41% Caucasian, 4.5% Asian and 4.5% Other. Teachers of students participating in the study were not made aware of the study's main hypothesis.

Independent Variables

The experimental design used in this study was a pretestposttest control group design in which both experimental and control groups received some form of treatment. Identified students were randomly assigned to either the experimental or control groups.

YCDI Cognitive Behavioural Resilience Lessons for Participants in the Experimental Group

Participants in the experimental group were taught lessons on emotional resilience that were drawn and adapted from the You Can Do It! Education's social and emotional learning curriculum program, Program Achieve (Bernard, 2007). As is illustrated below, many activities derive from the theory and practice of rational emotive behavior therapy (Ellis, 1994) and its educational derivative rational emotive education (e.g., Knaus, 1974; Vernon, 2006). The following is a summary of what was taught in the sessions.

Session 1. Introducing Emotions The content in this session was designed to help students build an emotional vocabulary and to become aware of their own emotions and emotions of others (feeling sad/down, angry and worried/anxious).

Session 2. Adversity: Bad Stuff That Happens The content of this session was designed to help participants identify the different degrees of anger, sadness and anxiety that different children can experience. Participants were helped to identify different common adverse circumstances that can lead to children feeling very angry, down or worried. Participants were presented with the "Emotional Thermometer." The Emotional Thermometer that measures

emotions. Children learned to rate the degree of their emotions when confronted with different tough situations, ranging from 1 (feeling almost nothing) to 10 (extremely upset).

Session 3. Introducing Emotional Resilience: Do Not Let Your Emotions Rule You The content in this session was designed to help students learn about what resilience looks and sounds like and what low resilience looks and sounds like. Participants were presented with the following characteristics of a resilient student. When faced with a challenging situation (e.g., taking a test) or person who is difficult (e.g., being mean or unfair), resilient students: stay calm (middle of Emotional Thermometer), when very upset control their behavior (e.g., do not fight or withdraw for too long a time), calm down within a reasonable amount of time, and bounced back to schoolwork or play. Participants were presented with the first of several emotional resilience coping skills: talking to someone you trust.

<u>Session 4. Do Not Sweat the Small Stuff</u> The content in this session was designed to help participants: (a) understand that not all thoughts that a person have are always and necessarily true, and (b) learn about the happening \rightarrow thought \rightarrow feeling \rightarrow behaving connection based on Ellis' Rational Emotive Behavioral Therapy. Additionally, participants were taught a second coping skill; namely, how not to blow adverse, bad events out of proportion. Through modeling, participants learned rational, coping self-statements they could use in adverse situations such as, "This is bad but it could be worse" and "I do not like it but I can deal with it."

<u>Session 5.</u> Increasing Your Tease Tolerance The content in this session was designed to help participants learn not to categorise teasing as the worst thing that could happen and as something impossible to cope with. The group leader and participants discussed the idea that often one cannot control the teaser but one can control how one chooses to think about the teasing.

Session 6. Coping Skills and Ways to Think that Build <u>Resilience</u> The content in this session was designed to teach participants additional cognitive and behavioral coping skills for dealing with stressful situations. Coping skills covered were: (a) use of positive vs. negative selftalk, (b) doing some type of physical activity, (c) using relaxation techniques such as breathing deeply and slowly repetitively, and (d) any other coping techniques that participants use to manage themselves in stressful situations.

Session 7. It's Good to Re-think During the session, the participants and the group leader chose different examples of difficult situations encountered by students during the week and together they analyzed what was likely to have gone on using HTFB charts. The participants identified the "Feelings" the person in question might be experiencing, how the person was likely to be "Behaving", and with help from the group leader, the

participants hypothesized about how the child in question was likely to be "Thinking." The group leader and participants identified and challenged the irrational thoughts that were likely to making the child in question feel so bad and together they created alternative rational thoughts.

<u>Session 8. Emotional Resilience at Work</u> The content of this session was designed to help participants understand how to use rational, positive self-talk to do better at school especially when having to do schoolwork they perceive to be very boring, time-consuming or difficult.

Eclectic Counselling Sessions for Participants in the Control Group

Students in the four control group received eight weeks of group counselling sessions provided by four different licensed school counsellors. Counsellors utilized an eclectic approach to deliver the sessions that included Person-Centered, Gestalt, Reality, Psychodrama, Multimodal, Art Therapy and Solution Focused Brief Therapies. The counsellors differed as to which practices they included in their sessions with some employing techniques such as play therapy, therapeutic writing, guided imagery, use of puppets, role play, art, and drama. Commonly, relationship building and development of trust were central to these sessions.

Dependent Variables

The Student Emotional Resilience Survey—Student Self-Report Form

The Student Emotional Resilience Survey—Student Self-Report Form consists of five items drawn from the ACER Student Social and Emotional Well-Being Surveys (Bernard, 2003; Bernard, Stephanou & Ulrich, 2007) which measure a variety of social and emotional competences including resilience which contribute to student social-emotional well-being. An analysis of both pre-test and post-test scores found the internal reliability to be near .70 (Cronbach's alpha for the pre-test = .70 and for the post-test = .69). Items include:

- When someone treats me unfairly or is mean to me, I am good at controlling my temper.
- I have someone who I can talk with when I get really upset.
- When I find myself getting very stressed, I know how to relax.
- I am good at thinking positive thoughts when bad stuff happens.
- I am someone who does not take mistakes or disappointments personally.

The Student Emotional Resilience Survey—Teacher Form

The Teacher Emotional Resilience Survey—Teacher's Form contains five items drawn from the ACER Student Social and Emotional Well-Being Survey (Teacher Form) (Bernard, 2003) which measure the same aspects of children's resilience as the items on the student self-report survey. An analysis of both, pretest and posttest scores found the internal reliability to be near .90 (Cronbach's alpha for the pre-test = .86 and for the post-test = .90).

Results and Discussion

For each of the statistical *t*-test procedures used in this study, the alpha level was set at .01. The Statistical Package for the Social Sciences (SPSS) was used for the statistical analysis. Means and standard deviations were established for all variables.

Table 1 presents the means and standard deviations of the students' emotional resilience self-ratings for the experimental and control groups. Paired sample *t*-tests for each of the groups found that the increase seen in the means from pretest to posttest for the experimental group was significant, t(21) = 6.57, p < .01, while the increase for the control group was non-significant, t(29) = 0.60, p = .56. A *t*-test comparing the experimental group with the control group found that experimental group posttest scores were significantly higher than the control group scores, t(21) = 6.85, p < .01.

Table 1: Descriptive Statistics for Pre-test and Post-test on Student Emotional Resilience Survey—Student Self-Report Form

	Pre-test		Post-test	
Group	М	SD	M	SD
Experimental	27.00	10.56	42.05	7.01
Control	30.57	7.80	31.80	10.91

Table 2 presents means and standard deviations of the students' emotional resilience ratings according to their teachers for the experimental and control groups. Paired sample *t*-tests for each of the groups found that the increase in means between pretest and posttest for the experimental group was significant, t (21) = 3.20, p < .01, while the increase for the control group was non-significant, t (29) = 0.91, p = .37. A *t*-test comparing the experimental group with the control group found that experimental group's posttest scores were significantly higher than the control group's scores, t (21) = 1.77, p < .05.

Table 2: Descriptive Statistics for Pre-test and Post-test on Student Emotional Resilience Survey—Teacher Form

Pre-test

Post-test

Group	М	SD	М	SD
Experimental Control	32.14 31.63	8.70 8.89	37.77 32.63	8.31 8.29
Control	31.03	8.89	32.03	8.29

The results presented indicate that the YCDI cognitivebehavioural program can significantly increase their selfperception of their emotional resilience, the teachers' perceptions of the students' emotional resilience.

Significant increases in the experimental students' perceptions of their emotional resilience in comparison to the control students suggests that the students in the experimental group perceived an increase in (a) their ability to cope with distressful events and (b) in their ability to calm down when overly anxious, angry or down.

These findings support past research (e.g., Henderson et al., 1992) which indicates that children who participate in cognitive-behavioral programs aiming to teach emotional regulation demonstrate higher levels of confidence in their abilities to cope with adversity. In a meta-analysis of 17 school-based studies of the effects of different forms of counseling and psychotherapy, Prout and Prout (1998) found that cognitive-behavioural interventions appear to have the stronger effects with elementary-age students.

Significant increases in the teacher perceptions of the experimental students' emotional resilience in comparison to the control students seems to imply that the teachers of the students in the experimental group (a) saw a significant change in behavior in their students and (b) perceived an increase in their students' ability to cope with distressful events and in their ability to calm down when overly anxious, angry or down. Therefore, this study suggests that the YCDI cognitive behavioural emotional resilience training can cause a positive impact on both students' and teachers' view of students' emotional resilience. This study also suggests that non-cognitive-behavioural approaches to counseling may not produce the same benefits on the control student's emotional resilience.

The YCDI cognitive-behavioral emotional resilience training may have been effective because students learned how to identify, challenge and change their irrational thinking to more rational self-talk. However, as the YCDI program also taught students different behavioural skills to cope with difficult and challenging situations as well as their own high levels of negative emotions (e.g., conceptualize the strength of emotions along a continuum from strong to weak, relaxation techniques, find someone to talk to), it is not possible to isolate the contributions of the cognitive from the behavioural components of the intervention. Additionally, as no direct measurement of behavioural incidents took place, it is not possible to state the extent to which the intervention impacted students' response to specific stressful situations. The results of the study add to our collective understanding about the type of content that should be included in social and emotional learning programs designed to enhance social and emotional well-being. It is clear that emotional regulation can be strengthened through the use of a skills-based social and emotional learning curriculum. The findings from this research support previous recommendations made concerning the utility of having school psychologists and other mental health practitioners offer time-limited, cognitivebehavioral group intervention programs for students identified at the early stages of demonstrating social and emotional needs.

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