

SMALL-GROUP COUNSELLING WITH PRIMARY SCHOOL CHILDREN

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A model of group work, based on personal construct theory, was developed for children aged between 8 to 12 years, attending school. Integrating the psychological needs of the children, counsellor skills and expertise, and criteria needed for treatment research, data were sought on changes to construing and behaviour, and on group processes, before and after the intervention. The rationale behind the use of these outcome measures is provided, along with a discussion of the results. The treatment efficacy and clinical utility of this approach, as necessary dimensions of evidence-based practice, are discussed. Finally, the clinical implications of this counselling treatment approach with primary school children, is explored.

Keywords: *group processes, personal construct theory, children*

Drawing on a range of psychological models of practice, group work for primary school age children has been increasingly taken out of specialised clinics and into school-settings (Auger, 2004; Crespi, Gustafson, & Borges, 2005; Kulic, Horne, & Dagley, 2000; Littrell, & Peterson, 2002; McArdle, Moseley, & Quibell, 2002; Riva, & Haub, 2004; Shechtman, 2002; Slavin, 2002). Evidence-based practice has generally targeted specific diagnostic groups of children, such as, the treatment of anxiety (e.g. Spence, Donovan, & Brechman-Toussaint, 2000), depression (e.g. Weisz, Thurber, Sweeney, Proffitt, & Le Gagnoux, 1997), and grief (Johnson, 2006), or in developing particular skills of empathy (Akos, 2000), of emotional resilience (Barrett, & Turner, 2001; Barrett, & Shortt, 2003), social skills (Aurelio, 2004; Campbell, 2003; DeRosier, 2004), and developing emotional intelligence (Pummell, 2003). While personal construct group work has been found to be an effective counselling intervention for clients of different ages and clinical problems (e.g. Jackson, 1992a, 1992b; Metcalfe, Winter, & Viney, in press; Truneckova, & Viney, 2001, 2005, 2006, 2007; Viney, 1998; Viney, & Henry, 2002; Viney, Henry, & Campbell, 2001; Viney, Metcalfe, & Winter, 2005; Viney, Truneckova, Weekes, & Oades, 1997; Viney, Truneckova, Weekes, & Oades, 1999), few investigations have been di-

rected at the effectiveness of personal construct group work with children.

We will describe a counselling model of group work with primary school students, striving to meet the criteria provided by the APA Task Force (APA, 2005; 2006) on evidence-based practice, of treatment efficacy and clinical utility. The principles of learning centred counselling (LCP; APA, 1997) are central to the model, where diversity is integral to the group counselling processes, the learning experience is meaningful and relevant to the group members, the group experience emphasizes dialogue, negotiation, and mutual feedback, the group leader's role is one of facilitator, and evaluation of the group experience is largely self-reflective (Stroh, & Sink, 2002). The effectiveness of this model of small-group counselling with primary school children was tested by measuring changes in social skills and self-esteem, and investigations were also undertaken into the group processes.

AIMS

The aims of these group counselling interventions are to investigate the treatment efficacy and clinical utility of personal construct group counselling for students with interpersonal difficulties.

1. to explore the changes in social skills and self-esteem of students participating in group counselling.
2. to inquire into the processes of personal construct group counselling.

HYPOTHESIS

Individual Changes

Changes in social skills

After group counselling, there will be an increase in effective social skills as reported by the students, and their teachers.

Changes in self-esteem

After group work, there will be an increase in self-esteem as reported by the students.

Group processes

After each group counselling session and at Time 2, the group members will indicate that they felt in the groups that:

- a) others listened to them
- b) they belonged
- c) they were understood
- d) they became stronger in themselves
- e) they became more self-confident.

METHOD

Participants

Fifteen students attending three government primary schools in New South Wales, Australia, have participated in small group work. The students, three girls and twelve boys aged between 8 years to 11 years ($M=9.93$ years, $S.D.=1.73$), were representative of the range of students in their school population, and of other students

attending primary schools in the region (Department of School Education, 2006). The demographic data for the participating students reported 40% from intact families, 53% from sole parent or blended families, 7% were in care, and no children identified themselves as Aboriginal or speaking a language other than English.

The students were referred by their teachers in consultation with their parents/carers. The students were described by their teachers and parents as demonstrating poor social skills resulting in either frequent conflict with peers, or social isolation from peers. Informed consent was gained from the participants, and their parents/carers, the group work being offered as a positive way to make some helpful changes in the student's behaviour at school. The first author was the group leader for all groups. Monthly clinical supervision took place.

Group work

Counselling service in the three participating schools was on a weekly basis for one school, and a fortnightly basis for the two other schools. Accordingly, the group work was conducted on a weekly or fortnightly basis, for 30 minutes or 45 minutes respectively. Each of the five groups of 3 students were closed, and the number of sessions ranged from 9 to 33 sessions (refer Table 1). The psychological intervention was based in personal construct theory, also drawing on an analytic approach (Cousens, 1999), where therapeutic space and containment are maintained by a structured group environment. With general goals of improving social and communication skills, the overall theme was of listening and trying to understand what the other member was saying. The group rules were: maintain confidentiality, each person has their own point of view, we need to listen to each other, we try to get along with each other, and we avoid interrupting others (Truneckova & Viney, 2007).

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Table 1. *Description of the group work interventions*

Group	Age (years)	Gender	Frequency of group	Number of sessions	Duration of group (months)
1.	8-9	boys	fortnightly	9	5
2.	9-10	boys	fortnightly	10	5
3.	9-11	girls	weekly	33	12
4.	11	boys	weekly	26	10
5.	10-11	boys	fortnightly	11	6

As goal setting is integral to process and effectiveness (Stroh & Sink, 2002), eight working goals were developed (Kelly, 1991a; 1991b), and used to evaluate the group processes through the Group Session Evaluation. The themes incorporated in the goals were: to provide confirmation; to facilitate a sense of belonging and a sense of feeling understood; to develop trust; to share meanings; to formulate hypotheses and design experiments leading to change in meanings; to explore similarities and differences in and outside the group; to apply group experiences to everyday situations; and to grow in self-esteem.

The group work began with the participants filling in the top section of their session evaluation sheet, then telling news, and asking questions of the news-giver, followed by the members taking part in the group activity, and reporting on the group activity to the group, and finally the members completing the session evaluation sheet. Depending on the group members' abilities to articulate their feelings and thoughts, the group activity focused on either a verbal or non-verbal task(s). The structure of the group activity for each session, involved each participant being the group leader, and as the group leader for that session they would choose the theme for the activity such as friendly/unfriendly, playing together/fighting, and they would also choose the medium to be used, for example 'play doh', drawing, painting, craft, turn-taking games. As group leader, they would then report on the group's achievement(s), and lead the discussion of the theme being tested through their activities.

Outcome measures

Measures to assess change

Three measures were used to assess individual change, the Social Skills Rating System (SSRS), the Self Image Profiles (SIP), and the Coopersmith Self-Esteem Inventories (CSEI). All measures when administered, were read aloud to each child.

Instruments

The Social Skills Rating System, (SSRS) (Gresham & Elliott, 1990) was developed in the United States of America to assess social behaviours of children 3 to 18 years using three rating report forms, parent, teacher, and student, with separate forms for preschoolers, primary age children, and adolescents. The instrument consists of three scales, the Social Skills Scale on all report forms, the Problem Behaviors Scale on the parent and teacher report forms, and the Academic Competence Scale on the teacher report form only. For this group work intervention, the teacher and student forms only were administered.

The reliability and validity of the SSRS has been reported extensively by the authors, reporting high reliability for the total scores across Teacher, Parent and Student Forms. The Teacher Forms showed the highest degree of reliability, internal consistency, coefficients and test-retest correlations ranging from .82 to .95, followed by Parent and Student forms. Several methods were used to test construct validity. Items were found to intercorrelate highly with median internal consistency reliabilities (coefficient alpha) of .90 for Social Skills, .84 for Problem Behaviors, and .95 for Academic Competence on the Teacher

Form. While not as high, there was evidence of convergent and discriminant validity across teacher, parent, and student raters (Social Skills total 0.31, $p < .001$ for teacher & parent ratings; 0.32 $p < .0001$ for teacher & student ratings; 0.24 $p < .001$ for parent & student ratings).

The second measure of individual change was the Self Image Profiles (SIP), a brief self report measure with separate forms for children and adolescents, providing both a visual display of self image and self-esteem. The theoretical rationale behind the development of the profiles is based on the notion of self as a personal construction, the child's sense of self is considered an interpretative act (Butler & Green, 1998). The SIP-C provides a measure of Self Image by asking the child to first rate the 'Actual Self' by indicating 'How I am' against each of the 25 items using a 0-6 Likert type scale. Measures of Self Esteem are achieved by then asking the child to rate the 'Ideal Self' by indicating 'How I would like to be' against the same 25 items using the same Likert scale. The discrepancy scores between 'How I am' and 'How I would like to be' provide an estimate of the child's self-esteem (Butler & Green, 1998; Harter, 1999).

Standardisation and validation of the children's form (SIP-C) involved 513 school children in Leeds, England. Construct validity was determined by comparing the SIP-C with the Self Perception Profile for Children (SPPC) developed by Harter (1985). The significant relationship ($p < .01$), between the two measures indicated the SIP-C self image and self-esteem scores were measuring the same theoretical construct of self identity or concept as the SPPC. Reliability of the SIP-C was explored and self consistency was found for both Positive Self Image and Negative Self Image ($p < .01$, 2-tailed). Internal consistency using SIP-C intercorrelations showed Positive Self Image largely concerned with 'social', 'academic', 'outgoing', and 'appearance' aspects of self, while Negative Self Image was made up with 'behaviour', and 'emotional' aspects of self (Butler, & Green, 2001).

The third measure of individual change, the Coopersmith Self Esteem Inventories (CSEI) (Coopersmith, 1981), is a widely used measure of evaluating self-concept (Peterson, 1985; Sewell, 1985), with school-age children and adults. Coopersmith (1967) defined self-esteem as a

personal judgement of worthiness that is expressed in the attitudes children hold of themselves. This instrument, a brief self-report questionnaire, assesses attitude toward one self in general, as well as in social (peers), academic (school), and home (parental) contexts. The child is asked to mark "like me" or "unlike me" on a set of 58 favourable or unfavourable statements about the child. The rationale behind the development of this measure is that the construct of self-concept merges with certain related constructs designated as self-esteem (Coopersmith, 1967, 1981). The reliability, stability, and construct validity of the questionnaire has been supported by considerable research (cited by Coopersmith, 1981).

Measures to assess group processes

The Group Session Evaluation (GSE) (see Table 2), forming part of the structure of the sessions and serving as an overview and review tool at the end of each session, was completed by the group members. Considerable research has been undertaken into the efficacy and effectiveness of psychotherapy (Lambert & Ogles, 2004; Miller, Duncan, & Hubble, 2004), and tools have been developed to measure counselling processes and outcomes. Inspired by these investigations, the GSE was developed to follow and record the group processes and group work outcomes, through the evaluations of the group session by the child. The GSE was designed to investigate the self descriptions of the child, and how the child rated herself or himself in terms of the supplied construct developed from the group work goals.

Table 2: *Group session evaluation.*

NAME: _____
 DATE: _____ SESSION: _____

Now, I am feeling _____
 and I am thinking _____

	Yes	A Bit	No
1. Today I felt others listened			

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to me.			
2. Today I felt others were nice to me.			
3. Today I understood more about me.			
4. Today I felt more strong about myself.			
5. Today I felt better about myself.			

Now, I am feeling _____
and I am thinking _____

Developed over three years through pilot studies, the current GSE measure has 5 supplied constructs and an ordinal scale of ‘Yes’, ‘A Bit’, and ‘No’. At the beginning and at the end of the session, the group members were asked to write down how they were feeling and thinking, “Now, I am feeling...and I am thinking....” At the end of the session, they were asked to indicate how they experienced the session by evaluating the session using the supplied constructs.

DESIGN

The data from all the group work interventions were pooled, and there was no examination to determine if there were any differences in outcome measures and group processes between the groups. This decision was taken because of the small size of the sample, and the differences in total number of sessions. A repeated-measures design was used to analyse data collected before the group work began (Time 1), and when the group work ended (Time 2), for each dependent measure, and to test the differences in the means. Descriptive statistics (number of responses, percentages) were calculated, to show the evaluations by the members of the group work process outcomes. The analyses of the data used the total raw scores for the different scales on each of the measures. For the CSEI, the total raw score was only used in the analysis. Currently, data are being collected to evaluate the group work intervention twelve months later (Time 3).

RESULTS

Retention rates were good (93%), with one member leaving to attend a school in another region.

Changes in Social Skills

The data from the SSRS were analysed at Time 1 and Time 2 using the Paired Samples Tests. While there was a significant increase in Social Skills reported by the teachers ($t= 2.188, p< 0.025$, one-tailed), a small to medium effect size of 0.4 (Time 1, $M= 86.9, S.D.= 8.62$; Time 2, $M= 90.6, S.D.= 10.52$), the students, however, did not report a significant increase. The data from the SSRS-Teacher also reported a significant decrease by the students in Problem Behaviors ($t= 1.136, p< 0.10$, one-tailed), with a medium effect size of 0.6 (Time 1, $M= 120.4, S.D.= 9.01$; Time 2, $M= 114.9, S.D.= 12.81$). The data from the SSRS-Teacher on Academic Competence, reported a small increase in academic performance by the students.

Changes in Self-Esteem

The Paired Samples Test was used to analyse each of the eleven scores provided by the data of the SIP-C. The participants reported a significant increase in Positive Self Image ($t= 1.372, p< 0.10$, one-tailed), a small to medium effect size of 0.3 (Time 1, $M= 46.4, S.D.= 14.95$; Time 2, $M= 50.1, S.D.= 12.18$), and a significant decrease on Negative Self Image ($t= 1.529, p< 0.10$, one-tailed), a medium effect size of 0.5 (Time 1, $M= 38.8, S.D.= 13.11$; Time 2, $M= 32.4, S.D.= 17.04$). While there was an increase in positive responses on Outgoing (aspect of Self Score), with a 0.4 medium effect size (Time 1, $M= 13.3, S.D.= 3.88$; Time 2, $M= 14.7, S.D.= 4.91$), it was not significant. The members also responded with a significant decrease on Resourceful (aspect of Self Score), ($t= 3.101, p< 0.005$, one-tailed), with a very large effect size of 1.24 (Time 1, $M= 5.4, S.D.= 1.45$; Time 2, $M= 3.6, S.D.= 2.14$), indicating at Time 2, they were not feeling as easily bored as they were at Time 1. The data from the SIP-C also indicated that at Time 2, the participants were ‘liking more

the way they looked', Appearance (aspect of Self Score). There was a significant increase ($t=2.066$, $p<.01$, one-tailed), with a moderate effect size of 0.64 (Time 1, $M=3.1$, $S.D.=2.02$; Time 2, $M=4.4$, $S.D.=2.06$).

The Paired Samples Test was also used to analyse the data from the second tool used to measure changes in self-esteem, the CSEI. There was a significant increase in self-esteem at Time 2 when compared to the self reports at Time 1 ($t=3.143$, $p<.005$, one-tailed), with a large effect size of 0.8 (Time 1, $M=50.8$, $S.D.=16.80$; Time 2, $M=64.1$, $S.D.=19.41$).

Changes in Group Processes

The analysis of the members responses on the GSEs was undertaken by pooling the responses to the two categories 'Yes' and 'A Bit', and comparing these responses over time, first Session of the intervention (First Session), middle Session of the intervention (Middle Session), and last Session of the intervention (Last Session). Percentages were calculated at First Session, Middle Session and Last Session for each of the five constructs (refer Table 3). The analysis of the members' responses (Paired Samples Test) supported the hypotheses, with evaluations ranging from 60-93% of students giving a positive rating on the five supplied constructs at the end of each session. However, the GSE revealed no overall significant increase in positive responses at Time 2 compared to Time 1.

Table 3 *The number and percentages of the group members' evaluations of the group sessions at First Session, Middle Session, and Last Session, Rated as 'Yes/A Bit', using the Group Session Evaluation.*

Construct	First Session		Middle Session		Last Session	
	N	%	N	%	N	%
1.	14	93	13	87	12	80
2.	14	93	13	87	11	73
3.	9	60	9	60	11	73
4.	10	67	10	67	11	73
5.	12	80	10	67	11	73

DISCUSSION

Personal construct small-group work was found to be effective with primary school students. The results demonstrated that there was an increase in positive social skills as reported by the teachers of the participants. Evidence was also gained from the teachers' reports that the participants after the group work were engaging in fewer problematic behaviours. Together, these measures demonstrate a consistent direction, suggesting the intervention had an overall positive impact. While the teacher's judgements were not blind, this positive direction could also be demonstrating construct validity in the test construction.

Although, the participants themselves only reported a small increase in positive social skills

at the completion of the group work, they did report increases on the measures of self image and self-esteem. The participants reported they felt more positive and less negative about themselves after the group work. By identifying themselves more positively after group work, they reported they felt more resourceful, and liked better the way they looked. Supporting these reports of feeling more positive about themselves, were also reports by the participants of positive increases in their self-esteem after the group work. These increases in self-esteem while not consistently reported across all the measures of self-esteem, were significantly strong on one of the measures of self-esteem (CSEI).

While the group evaluation sheets were able to capture the students' immediate positive reac-

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tions to the group sessions, they were not able to track the impact, the changes in social skills and self-esteem were possibly having on the group processes. The students' responses indicated that the group sessions on the whole were positive and enjoyable, and most times they felt they belonged to the group and were understood, that the group members listened to them, and they felt stronger in themselves, and more self-confident.

While the results are encouraging, there are a number of design problems which need to be discussed. One of these problems relates to the population of students. The inequitable gender and age distributions, is one such difficulty, others are the differences in the number of sessions, and the varying lengths of the interventions. Running groups across three different schools also introduces unknown variables which could possibly confound the results. There are also the problems associated with using a model rather than a manualised approach. However, useful data were collected from the group members through the Group Session Evaluation at the end of each session, which provided some validation that the intervention was compatible with the group work goals established by Kelly's (1991b) assumptions of personal construct group psychotherapy. Data collections at Time 3 are not available to provide further support for the effectiveness of the intervention. Finally, the group work intervention has not been compared with other psychological approaches. These design problems influence the power of the findings, the generalisability of the results, and question their representativeness.

CLINICAL IMPLICATIONS

Personal construct small-group work for primary school students was developed to integrate the psychological needs of the students, counsellor skills and expertise, and the criteria needed for treatment research. The clinical implications are that the intervention was able to meet some of the psychological needs of the students, and that the skills and expertise of the group leader were useful and necessary. Over the sessions, the participants increasingly felt they were a valued member of their group, and that their group

would always be there to support them. The clinical implications of these experiences were that the participants found it was 'safe' to talk about their anger and anxieties, and that when they talked, they felt 'better.' They also found that when this happened, they weren't as easily provoked into reacting to others with physical threats and violence. It also led to the participants being able to express themselves more effectively and appropriately, inside and outside their group. The clinical implications of these group processes for group leaders, is the need to provide simultaneously, support for each member, and for the group as a whole. While providing this dual support, leaders also need to model reflexive listening, and provide encouragement for members to experiment, and not 'shy away' from possible changes in themselves, and from changes in the reactions of others to themselves.

The clinical implications are also that this intervention is able to go some way to meeting the criteria for evidence-based practice, leading to improvements in social skills and self-esteem by the members. The approach has been shown to be applicable and a useful intervention in a school setting with primary school age students.

CONCLUSIONS

The research has shown that small-group personal construct counselling is a useful and efficacious intervention, which improves the psychological functioning of primary school students. It is also an approach that can be undertaken in a school setting by the school counsellor. Future investigations are needed to overcome some of the design problems in this research, and to account for other factors which have been shown to contribute to effective interventions, such as, counselling method (Nathan & Gorman, 2002), the counsellor (Wampold, 2001), the counselling relationship (Norcross, 2002), and the client, the students (Bohart & Tallman, 1999). Future focused research and programme evaluation is needed to endorse evidence-based group interventions with children.

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