

PSIWORLD 2011

The efficacy of SELF KIT program in developing socio-emotional competencies of kindergarten children

Adrian Opre^{a*}, Ramona Buzgar^a

^a*Babes Bolyai University, Cluj Napoca^a*

Abstract

Recent scientific papers proved that irrational beliefs appear to be related to internalized and externalized emotional and behavioral problems (Silverman & DiGiuseppe, 2001). Looking for pertinent solutions in the present study we assumed to demonstrate that SELF KIT program (Social-Emotional Learning Facilitator) is efficient in developing social and emotional competencies (SEC) in kindergarten children. A 3x2 factorial design (intervention type vs. team expertise) was applied. Working with preschool children (223) a 12 weeks intervention program was implemented. Our results, computing by MANOVA, showed that SELF kit had a really impact on SEC ($p < .05$). Future directions and implications are discussed.

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Keywords: social-emotional competencies; SELF KIT; , REBT; counselling programs;

1. Introduction

1.1. Rational emotive education

Rational emotive behavioral therapy (REBT, Ellis, 1971) asserts the idea that people's reaction to an event is the result of the interpretation they give to that specific situation. Most of the emotional and behavioral problems that children show are a consequence of their irrational beliefs (Silverman, DiGiuseppe, 2001). Therefore, if we want to decrease negative behaviors and emotion, the best way to do it is to enhance rational thinking. Following the "classic model" of applying adult therapy techniques to children (child therapy), psychologists took REBT principles and transposed them into two types of programs: (1) rational emotive therapy (or RET), used in individual counseling and therapy session with

* Adrian Opre.

E-mail address: adrianopre@psychology.ro.

young people and parents or significant others, and (2) in the form of a curriculum taught to a class of children (Hajzler, Bernard, 1991), called rational emotive education, or REE. Since 1976, many studies have pointed out that REE decreases irrational beliefs (Buckley, 1983), has a significant effect on emotional regulation mechanisms (DiGiuseppe, Kassiove, 1976), school performance (Sapp, 1996, Weissberg et al., 2007) and social skills (Flanagan et. all, 1998), reduce anxiety (Rosenbaum et. all, 1998, Egbochuku et all, 2008, Birl, Opre, 2008) and depressive symptoms (Wilde, 1999). Having analyzed 19 meta-analyses available between 1997 and 2007, Diekstra (2008) noted that Social Emotional Learning programs or SEL had a positive impact in both externalized and internalized problems, although there are fewer studies on stress, depression, suicidal attempts, anxiety.

The REE programs mostly mentioned in different databases have been conducted in the US, Canada or Australia, there are REBE and REE programs in Europe too, known under the name of SEL (Social and Emotional Learning) , Social and Emotional Aspects of Learning (SEAL), Skills for Life, Emotional Intelligence, Character Education etc. All these programs are a form of REE and focus mainly on behavior and emotional regulation.

In Romania, teachers and psychologists use translations of well-known programs like - “Rational stories for children” (V. Waters), “Developing Emotional Intelligence through Rational Emotive Behavioral Education” (A. Vernon), “You Can Do It! Education” (M. Bernard). Although some studies confirm the positive effects of the programs mentioned above (Trip et. all, 2010), other studies have revealed some problems – not all the stories and activities are well understood by children (Giba, Opre, 2010), the stories don’t follow the pattern our children are familiar with, the activities don’t have the same impact on children as expected (Cristea et.all, 2008), some topics or situations discussed in the group sessions are not familiar to our pupils etc. Taking all these into consideration and the fact that many research centers use their own programs, we created a new REE curriculum - SELF KIT.

1.2. SELF Kit program

As scientific literature states (Diekstra, 2008, Hajzler, Bernard, 1991), a good rational–emotive education curriculum is a complex program with materials designed for educators, children and teachers. SELF Kit (Social Emotional Learning Facilitator Kit, 2010) takes into consideration the following outlines: (1) respects the ontogenetic stages of development, (2) it is based on the psychological development characteristics of children, (3) follows the structure of Romanian educational curriculum, (4) it is based on the specificity of Romanian culture. The main topics of the program were the result of a need assessment meant to identify the emotional problems that our children are confronted with. Based on teachers’ and parents’ answers to questionnaires we identified 8 dysfunctional negative emotions that ought to be included in our program: sadness/ depression, separation anxiety, fear of emotional injury/ or being hurt, anger, guilt, shame, jealousy and envy. Each emotion is presented in a module that comprises: a story, a folk tale, one or more therapeutic activities, games with letters, words and images (cross-words), poems, coloring pages, encyclopedia, proverbs and sayings, board games and the audio storytelling. All these elements are saturated in REBT theory and principles.

Each story follows the pattern of a counseling/therapy session, in which the main character is confronted with a situation that activates his/her irrational beliefs. As in a classical counseling session, another story character (the therapist) teaches “the client” how to think rationally, and how rational thoughts change the way he/ she feels and behaves.

The therapeutic activities dispute the main character’s irrational beliefs, focusing mainly on children re-living the negative experience, or on identifying the relation between cognition and emotion and how they can change “unhealthy thoughts” with good ones (they do this through specially designed games, role-playing, conversation or debate). The poems, the board games, the cross-words, the coloring pages

are all a reminder of the ABC cognitive model of REBT, in order to constantly remind the children of the power of rational thinking. Looking for ecological validity the purpose of the present study was to measure, in natural environment, the efficiency of SELF Kit program in developing social and emotional competencies of kindergarten children.

2. Method

2.1. Subjects

The participants were 223 preschool children (116 girls and 107 boys), aged 4 to 6, enrolled at Kindergarten University (Cluj Napoca), a mainstream education institution. All children have their residence in Cluj Napoca, 16 speak Hungarian as their mother tongue but speak Romanian very well, and 8 were included, for disruptive behavior, in a monthly session with a school psychologist. No other problems (emotional or behavioral) were mentioned by the teachers or psychologist.

2.2. Measures

The children were assessed (in pre and post-intervention) by teachers and parents using the PEDa Platform (Platform for Child Development Evaluation, Cognitrom, 2010) under the supervision of psychologists team. PEDa is a multi-method and a multi-observant evaluation system designed for parents (18 scales), teachers (36 scale) and psychologists (49 scales and tests). For this study, in accordance with our objectives, we used only the social competencies scale, emotional competencies scale, cognitive competences scale, motor competencies scale, personal autonomy scale, disruptive behavior scale and Spence anxiety scale (adapted for the Romanian children population). Each scale has items rated on a Likert scale type with 3, 4 or 5 points.

2.3. Procedure

After the initial evaluation (pre-intervention assessment with PEDa) the children were assigned to different intervention groups. Because we know that the teacher's educational background can influence the result, we chose to use the team expertise as an independent variable (REE expertise vs. no REE expertise), along with the type of intervention (3x2 factorial design). One group followed the SELF Kit program, implementing all 8 modules (1 module per week). In the second group the teacher had a conversation with the children about emotions, thoughts, good behavior (non-systematic REE program) and the last group received no intervention. After 8 weeks, the children were again evaluated, using the same scales.

The three REE expertise teachers participated in a training program about REBT principles, the ABC cognitive model, the structure of an REE program. The teacher working with the SELF Kit had 4 separate meetings with a member of our team in which we explained the structure of the program, the activities' typology, and established some ground rules for their implementation.

3. Results

The data collected from pre- an post-intervention assessment made by teachers and parents with PEDa instruments, applied by psychologists team were computed by SPSS. As we expected, the group that worked with the SELF Kit program and had a teacher with REE expertise proved to be more efficient in improving the social, emotional ($F=4.14$, $p < .05$) and behavioral skills of children ($F=5.10$, $p < .05$),

relative to all the other groups. The data, analyzed with MANOVA, showed no significant difference between non-systematic REE intervention groups, regardless of the teacher expertise. There is also a significant difference ($F=5.04$, $p<.05$) between the non-systematic REE intervention group with an expert teacher and the no intervention group with no teacher expertise. As concerns the parents' and the teachers' assessments, there were no significant differences between the scores in pre or post-intervention evaluations. That means we can consider the results as objective measures and having good reliability for the scales items. For the cognitive scale and the personal autonomy one, the scores revealed a significance of $p<.01$ ($F=4.41$) for the SELF Kit program with an expert teacher compared to all the other classes of children.

4. Discussion and conclusion

Working with children as young as 4 can be very difficult, especially if you want to change their thoughts – irrational beliefs in our case. They have problems in differentiating between emotion-cognition-behavior. They don't have an appropriate and discriminative emotion vocabulary. Most of the children we worked with were not able to identify or name other emotions besides "happiness" or "sadness" and their synonyms. Thus, the first step in working with emotional development programs for young children is to help them name, identify/recognize and describe emotions. At this age children play a lot, so the games in our program, such as the memory –game, prove to be of big help for emotion-recognition and naming of emotions. The activities help them identify personal situations when they reacted in the same manner, but with the help of the characters they could learn how to deal with that situation in the future – learn what to do. The activities and the poems also encouraged children to change the way they think and feel by outlining the connection between thought and emotion, and by making them realise how good thoughts aid everyone for feeling better and behaving in a proper manner.

The results support the idea that a systematic and complex intervention has better results on children. So if the child is presented with a large and diverse material that immerses him in the topic, he understands at the end what we want him to learn. In the groups with no REE intervention or without SELF Kit intervention, discussions about shame, for example, lasted only 15 to 20 minutes and the focus was on good behavior and what we are supposed to do when "caught in the act": just say "I am sorry", and don't do that again.

The teacher's expertise was also an important factor that influenced the efficiency of our program. We observed that even if they had taken up the training program, for those with a poor understanding of the ABC model, it was very difficult to make connections only between B (beliefs) and C (consequences). Although they would sometimes ask about what the child was thinking of, they didn't differentiate between irrational or rational beliefs and which one was causing the child to feel in a specific way. In the no intervention group and in the ones with no teacher REE expertise, they focused only on the behavioral ABC model. More exactly, they only used rewards or penalties to change children's behavior. No effects were measured for the social and emotional development of these groups. These findings are not surprising, because in the Romanian educational system we often teach educators how to change behaviors only by giving or taking something (rewards or penalties) to/from the children. That was how we knew where the development was going (the children learn what to do and not to do and why- the parents or teacher's explanation). The teachers never cross to the other side of the line – e.g., what the child is thinking and feeling and why he always says "ok, I understand", but after a few minutes or days, he does it again.

Our pilot study also revealed that there is a need for changing focus on teacher training in Romanian pre-school classes, and there is an acute need for valid and adapted REE programs. In this respect, it is necessary to develop curriculum-based programs that can help pre-school children develop their social,

emotional and behavior skills before the age of eight, when the behavior and socio-emotional functioning seems to settle down (Huesmann, Guerra, 1997).

Naturally, this study has some limits too. The number of subjects used in the study, the fact that we only worked with only one kindergarten, the short period of time for intervention etc. The next step is to test the same children again in autumn (after 6 months) to see if the results obtained are stable and if the differences between groups will be the same. Therefore, we will continue to implement the program with the children in the Self Kit program group and with the expert teacher. We also plan to extend the study to a larger number of children from different kindergartens in Cluj and in other regions of the country to get more data that we hope will increase the validity and the efficiency of the SELF Kit program, as a rational-emotive education program.

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