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## A CBT MODEL OF PARENTING THE ANXIOUS CHILD

**CARTWRIGHT-HATTON, S., B. LASKEY, S. RUST & D. MCNALLY (2010) *From Timid to Tiger: A Treatment Manual for Parenting the Anxious Child* (Oxford: Wiley-Blackwell) 29.8 cm, 169 pp., ISBN 978-0-470-68310-1, £24.99.**

In the last few decades the model of cognitive behaviour therapy (CBT) has become one of the most prominent and widely used therapeutic methods in the United States, Europe and Australia. Since its establishment in the 1950s by Aaron Beck and Aaron Ellis to treat depression, increasingly sophisticated cognitive behavioural models (CB) of mental illness have been elaborated and applied to almost every category of mental health problems, including anxiety disorders. Although the CBT was originally planned to treat adults, in the last decades several modifications of the CBT have been developed in order to make it applicable to children's depressive and anxiety disorders. One of the most famous programmes of which many variants have appeared, called the 'Coping Koala (Cat)', has successfully been employed to treat many forms of anxiety disorders in children and adolescents (KENDALL 1990, 2000). These modifications have taken into account not only the developmental aspects but also the specific features of symptom formation in childhood in planning the treatment in the CBT model. Partly because of their well-structured methodology, the CBT and CBT-based methods have become good candidates for outcome research, and were soon defined as one of the rare therapeutic methods that could be called 'evidence-based'.

In spite of new developments in the methodology, the application of CBT is obviously limited in the case of younger children, especially under 7 years, mostly because of their limited capacity of self-reflection, verbalization of feelings and emotions, and other cognitive capacities. In terms of the CBT model, children under 7–8 years have difficulties in utilizing the Thoughts, Feelings, Behaviour (TFB) Cycle and many other techniques of CBT. It has been demonstrated that the combination of individual child CBT and structured family parent session, like in the 'Friend' programme, proves to be more effective in the long run in treating children's anxiety disorder than individual CBT for children only (MURIS 2007).

Sam Cartwright-Hatton, a distinguished clinical psychologist in Manchester, together with her experienced colleagues in parenting programmes, has developed a new parenting intervention manual. *From Timid to Tiger: A Treatment Manual for Parenting the Anxious Child* is special in a sense that it aims to fill the gap of treating very young children's (3–9 years) anxiety disorders via enhancing parental skills only. The manual is written essentially for mental health professionals and offers a programme that focuses on helping parents rather than children to manage and treat anxiety of the young child.

The programme was basically designed for families with children suffering

either from separation anxiety, generalised anxiety, panic, agoraphobia, or specific phobias and social anxiety. The combination of two methods – the CBT model and Behavioural Parent Training – essentially also features the basic conceptual model of the book.

### **Structure and content of the book**

The Manual provides us with a practical structure of the programme and its theoretical background. Chapter 1 describes the brief history of CBT and its basic elements, like the flight/fight response, avoidance, metacognition and the Thoughts, Feelings and Behaviour (TFB) Cycle model as well as the cognitive model of anxiety. The ‘Seven Confident Thoughts’ are introduced as a basic working concept for the TFB model, and behavioural training for parents. In describing the basic rules of ‘Behavioural parent training’, the techniques of Play, Positive reinforcement, Setting limits, Withdrawal of attention, Punishment and Time out, and Modelling are emphasized. These issues are elaborated in detail in the next chapters of the book.

Chapter 2 offers a practical guide of how to use the Manual. Techniques of parent guiding as well as group leading are listed. The step-by-step method of the structured CBT-based parental guide techniques and the specific topics of the sessions are provided from Chapter 3 to Chapter 12. These chapters are essential elements of the book, as they describe the specific topic of each session together with technical guidance of how to lead the group and organise practical and theoretical material. The chapters are essentially the building blocks of the training and the Manual. As they are built on each other, they cannot be used separately but only in their specific context with each other.

Session One (Chapter 3) introduces some basic concepts of the programme to participating parents. It specifies the basic rules of working together in the group and explores the participant parents’ problems concerning their child’s anxiety and their efforts and failures in managing these problems. The TFB model and the Seven Confident Thoughts model are introduced. The ‘Anxiety Pyramid’ is also presented to parents as a working concept for parental guiding of anxiety. Giving home practice is also a significant feature of each session. Session Two (Chapter 4) is about securing the parent–child bond. The session focuses on enhancing the parent-child attachment via offering play techniques and helping parents pay attention to their children.

Understanding children’s anxiety is the topic of Session Three (Chapter 5). In this session, parents start to learn about children’s anxiety in general, and its theoretical consequences, like avoidance, flight/fight response, etc. Session Four (Chapter 6) teaches parents to use praise to build their children’s confidence. The ‘Stairway to Bravery’ technique is used in this session. Session Five (Chapter 7) is about

using rewards to get children motivated. Motivational techniques of how to encourage the anxious child to do something are introduced.

Session Six (Chapter 8) describes the brief theory and technique of how to teach parents to set limits on their anxious child's behaviour. The importance of being clear, predictable and positive is obviously the general message of this session and many specific behavioural techniques are provided. Session Seven (Chapter 9) aims to teach parents how to use withdrawal of attention to manage their child's behaviour. Like setting limits, withdrawal is also a tricky technique to use in parenting either with children developing typically or with anxiety and other disorders. Session 8 (Chapter 10) is about managing children's worries. The aim of this session is to give the parents a simple tool to use when they face their child's worries. Session Nine (Chapter 11) focuses on managing really difficult, stubborn behaviour in children. Techniques of Time out ('super-ignoring') and Consequences are introduced to deal with non-compliance, and dangerous, destructive behaviour. Finally, Session 10 (Chapter 12) 'wraps up the course', where parents are given the opportunity to ask final questions. They are also given certificates for completing the 10-session course.

### **Benefits and shortcomings**

The authors summarise the long-term goals of the parenting course that can only be agreed with. They stress the importance for parents to recognize their children's moods and behaviours in the context of good and bad days. The training obviously aims not only to teach parenting techniques but also to enable parents to reflect on their child's emotions as well as on their own reactions to those emotions. Techniques that have been taught during the course are encouraged to be used in everyday life and everyday problems with the children. Based on their experience with many groups, the authors claim the effectiveness of this special training in treating anxiety disorders of children. Unfortunately, details of this research are not mentioned in the theoretical introduction of the Manual.

Concerning the shortcomings, it has to be mentioned that individual differences in parenting styles, the complex symptomatology of the specific anxiety disorder as well as the specific features of the individual child's developmental phase are not included and discussed in this structured step-by-step parental training. In my view, this is one of the most significant shortcomings of the Manual. My three-decade-long experience as a child psychotherapist, working with children and their families, has taught me to thoroughly consider these very important individual aspects of each child and his or her family when planning any kind of parental guidance or thematic group for parents. By ignoring these very important issues, the Manual seems to suggest that anxiety symptoms and 'children's worries' could be understood and treated by acquiring a well-structured parenting discipline repertoire only, independently of the young child's age range and individual characteris-

tics of his or her anxiety disorder. Although the Manual warns the reader to remember that the group consists of 'unique individuals' and suggests thinking about how they would respond to the session's material, it does not give clear instructions on dealing with these issues.

### **Who is this book for?**

The Manual is essentially for mental health professionals who work with children and families and are familiar with the CBT model. Because of its special theoretical and technical background, one will need to have some training in CBT as well as in behavioural parent training. Experience of working with groups is also recommended. The authors emphasise that at least one of the group leaders needs to be skilled in basic CBT techniques like cognitive challenging, simple formulation, etc. and should also understand the basic CBT model of anxiety (role of anxious thoughts, the flight/fight response and avoidance).

My additional suggestion is that plenty of experience in treating children with various clinical disorders is also necessary so as to be able to deal with individual differences in diagnostic issues and treatment proposals based on these issues.

### **References**

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