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Dedication

This thesis is dedicated to my sunshine, Benjamin Christopher. Remember you can do anything you set your mind on. Mommy loves you to the moon and back.
Abstract

Divorced and separated parents are at a disadvantage when considering the parent-child relationship, and can experience extraneous amounts of stress surrounding their lives as divorced parents. Strengthening the parent-child relationship has been shown to decrease levels of stress in this population. The present thesis describes the development and design of the revised Restructuring After Divorce (RAD) program and accompanying facilitators’ manual for the parental group. The program was created to fill the gaps in the literature pertaining to a treatment rooted in delivery of cognitive-behavioural therapy sessions for parents with concurrent sessions for their children. These sessions provide behavioural techniques, psychoeducation and behavioural rehearsal together to reduce stress and strengthen and promote a positive parent-child relationship. The RAD program aims to increase parent-child relationship, coping skills, communication skills, and reduce stress levels of both parent and child through a concurrent psychoeducation curriculum and parent-child activities surrounding learned techniques. The facilitator’s manual has two editions, one for parents and one for children. The development of the adult manual is outlined. The manual includes weekly lessons that identify the skill being taught, a layout of the lesson including discussion, psychoeducation and the parent-child activity. The manual has all handouts, and information the facilitator should need. The target participants, possible recruitment outlets, design, setting, materials and measure for the second revised integration of this program are also described. Recommendations and future areas of study include adapting the program for a wider range of participants, and using a wider range of standardized measures.
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# Table of Contents

Dedication ................................................................................................................................. ii  
Abstract.................................................................................................................................. iii  
Acknowledgements ................................................................................................................... iv  
Chapter I: Introduction ............................................................................................................. 1  
  The Negative Effects of Divorce .......................................................................................... 1  
  Current Divorce Supports ................................................................................................. 1  
  Restructuring After Divorce Program .............................................................................. 2  
Chapter II: Literature Review .................................................................................................. 3  
  Introduction ......................................................................................................................... 3  
  Impact of Divorce .............................................................................................................. 5  
  Current Divorce Services .................................................................................................. 6  
  Cognitive Behavioural Therapy ...................................................................................... 6  
  Group Cognitive Behavioural Therapy ........................................................................... 6  
  Summary of the Literature .............................................................................................. 8  
  Relationship Between Literature Review and Current Thesis ...................................... 8  
Chapter III: Methodology ....................................................................................................... 9  
  Participants .......................................................................................................................... 9  
  Design ................................................................................................................................ 9  
  Setting and Apparatus ...................................................................................................... 10  
  Materials ............................................................................................................................ 10  
  Measures ............................................................................................................................ 11  
  Procedure ........................................................................................................................... 11  
Chapter IV: Results ............................................................................................................... 12  
  Product ............................................................................................................................... 12  
Chapter V: Discussion ........................................................................................................... 12  
  Summary ............................................................................................................................. 12  
  Strengths ............................................................................................................................. 12  
  Limitations ........................................................................................................................ 14  
  Multilevel Challenges ..................................................................................................... 14  
  Recommendations for Future Research ........................................................................ 15  
  Implications for the Behavioural Psychology Field ...................................................... 16  
References ............................................................................................................................... 17  
Appendices ............................................................................................................................. 20  
  Appendix A: Recruitment Flyer ....................................................................................... 21  
  Appendix B: Consent and Assent Forms ......................................................................... 22  
  Appendix C: Facilitator Manual for Parental Group ...................................................... 27
Chapter I: Introduction

A divorce is the termination of marital responsibilities between two people. This dissolution must undergo a civil court proceeding to be documented as legal. According to Statistics Canada (2016), the 2016 census revealed that 1,899,832 from both sexes were divorced. It is projected that 43.1% of marriages will end in divorce before reaching the 50th anniversary with an increase of 39.9% from the previous decade (Statistics Canada, 2011). With 1.2 million divorced or separated Canadians having children under the age of 18 (Sinha, 2014), it is reality that many divorces are involving children. The challenges that divorced families are faced with encompasses families who have experienced separation due to the similarities on multiple levels. A separation is when a couple decides to no longer live together, the couple may be married or unmarried and living common-law when they decide to split.

The Negative Effects of Divorce

Although divorce can have egregious consequences and outcome in nature; the consequences and outcome of remaining in an adverse (abusive, unaffectionate or undesirable, etc) relationship can have a significantly greater effect (Whitton, Rhoades, Stanley, & Markman, 2008). This program’s focus has been limited to consider divorce situations that are related to the growth or heightening of stress and interpersonal challenges post-divorce and not to disregard the value of legal separation. There are two sets of negative effects that need to be taken into consideration when parents’ divorce or separate. The parents themselves have a set of negative effects as well as the children that accompany them during the divorce or separation. Amato (2000) did an extensive review of 1990s literature to compare divorced individuals to married. He noted that divorced individuals experience decreased levels of happiness, low self-worth, higher stress levels, and stress-related health problems (Amato, 2000). Amato suggested that divorced individuals also were susceptible to parenting struggles, former spousal conflict, and economic disadvantages. Rotermann (2010) suggested that divorce may cause more disruptive life changes which could be detrimental to one’s mental health, she also notes that depression is more common in divorced Canadians between the ages of 20 and 64, then their married counterparts. A more specific study conducted on fathers that have been through martial dissolution looked at their relationship with their child and the psychological well-being of that father and noted that lower relationship quality and decline in happiness was experienced by non-resident fathers (Shapiro, & Lambert, 1999).

Wallerstein (1991) suggested that children may experience psychological and social difficulties post-divorce. It was also noted that children of divorce experience a higher level of anxiety in forming meaningful attachments later in life (Wallerstein, 1991). These negative effects are not limited to early childhood, research has shown effects continue into early adulthood. Amato & Sobolewski (2001) gathered longitudinal data to suggest that divorce predicts lower levels of psychological well-being in adulthood, in children of divorce, and can negatively affect the child’s bond with a specific parent. The seriousness of both parent and child adverse effects prompts beneficial treatment to alleviate or diminish these effects for this population.

Current Divorce Supports

There are current divorce supports for families that have been shown to be beneficial, such as parent education resources including online resources (Centre for Community Child Health, 2007) and child-parent relationship therapy (Taylor, Purswell, Lindo, Jayne, and Fernando, 2011). Sigal, Sandler, Wolchik, & Braver (2011) discussed that these parent
education programs are focusing on needs identified by both parents and the court systems. They stated that most of these programs are created to improve child well-being post-divorce while adapting some aspect of parenting (Sigal et al., 2011). These education programs are taught by individuals with backgrounds in family law, child-welfare or family studies (Amato, 2012). It was discussed that although the programs receive high satisfaction rates from participants, there is little evidence to support that programs are achieving their stated goals whether that be improving parent-child relationship with the non-residential parent, or the quality of parenting between the divorce parents (Sigal, Sandler, Wolchik, & Braver, 2011).

Child-parent relationship therapy (CPRT) as stated by Taylor, Purswell, Lindo, Jayne, and Fernando (2011) focuses on teaching parents to use child-centred play therapy to reduce problem child behaviours. CPRT has promising results as measured by the Child Behaviour Checklist (Achenbach & Rescirka, 2011) and the Parenting Stress Index (Abidin, 2012). Despite positive results, there are certain limitations to be wary about. The focus of CPRT is the problem child behaviour, which can leave gaps for some families in other struggles that they may be facing. The therapy also lacks psychoeducation on anything other than the child-centred play sessions, and does not leave any time for reflection of the parents themselves, and any thoughts, feelings or behaviours they may have as a result of the divorce (Taylor, Purswell, Lindo, Jayne, and Fernando, 2011). The therapy leaves gaps in its services that could be filled with a more holistic approach that focused on both parent and child, as well as offered some teaching on reflection, behavioural rehearsal and techniques, and relationship building.

At the present time, there are no documented therapies for divorced and separated families that have developed a singular curriculum created in two different age-specific methods, which includes behavioural rehearsal activities that involve both parents and children of divorce.

Restructuring After Divorce Program

This program hopes to address the negative effects of divorce and/or separation using a method that bridges the gaps in the currently provided local services. The purpose of the program is to implement group cognitive behaviour therapy (GCBT) sessions for parents of divorce with concurrent sessions for their children that provides practical knowledge and behavioural rehearsal to promote positive relationships for both parent and child, reduce the stress and other related symptoms associated with being a divorced or separated parent, and improve coping skills and communication skills. The aim of the program is to use group cognitive behavioural therapy (GCBT) to increase the quality of the relationship between divorced parents and their children.

This thesis offers an introduction chapter that includes an overview of the topic of divorce, a rationale for the RAD program, and a hypothesis for the program. An inclusive literature review that provides evidence-based literature displaying the impacts of divorce, supports available to the divorced population, and ensuring best practices and techniques are used in addition to the manual, techniques utilized in the manual and sessions are summarized in this chapter. A methodology section detailing the creation of the manual, including the development of activities, psychoeducation, parent-child activities and evaluation tools. The results section consists of the manual itself. Finally, a discussion voicing limitations, strengths, challenges to service implementation, recommendations for further research and how it contributes to the field of behavioural psychology.
Chapter II: Literature Review

Introduction

The purpose of this literature review was to solidify the creation of the Restructuring After Divorce Program Facilitator’s Manual. It was to provide empirical evidence for the methodology, concepts and skills within the program. It is projected that 43.1% of marriages will end in divorce before reaching the 50th anniversary (Statistics Canada, 2011). In Canada, The Divorce Act governs divorce and is only granted to individuals who have demonstrated a marriage breakdown (Eichler, 2016). A marriage breakdown can occur in a number of ways. If spouses have lived separate for one year (known as separation), a spouse has committed infidelity, or your spouse has been physically or mentally cruel to you (Eichler, 2016). Two types of divorce exist in Canada, uncontested and contested divorce (“Contested vs. Uncontested Divorce Procedures,” 2017). Uncontested divorce arises when a separation agreement is in place that resolves all issues within the divorce (“Contested vs. Uncontested Divorce Procedures,” 2017). In comparison, contested divorce arises when the divorcing couple is not in agreement surrounding certain matters (“Contested vs. Uncontested Divorce Procedures,” 2017). The latter often requires the use of legal support due to disagreements regarding several key elements such as division of assets, child support, alimony, and child custody. Society has become much more accepting of divorce, as it is more of a marital status, reflected by the statistics provided from the yearly census. However, there are still misconceptions surrounding what a divorce looks like, and how ex-couples are to interact. Some of which are, there needs to be a reason for the divorce (such as infidelity), someone is to blame, or the all-or-nothing paradigm (Ricci, 1980; David, 2015). Divorce often comes with many new changes and can be a big change for parents and children. Couples that divorce may experience changes in financial situations, living arrangements, and child custody. Children may also experience changes in living arrangements, weekly movement, and routine changes (Amato, 2012).

Impact of Divorce

Current literature examined for this manual acknowledged challenges that families may experience. These difficulties can appear in all domains and by both parent and child. Amato (2012) proposed that divorce was not an isolated event but a process that can continue for extended periods of time. Amato (1987) acknowledged that children, post-divorce, often have a decreased in both of the quality and quantity of the relationship with the noncustodial parent. Later Amato & Keith (1991) proposed that custodial parents have fewer hours to devote to their child due to being in the labour force. It was then suggested that children of divorce experience decreased parental attention, assistance and supervision (Amato & Keith, 1991). Amato & Keith (1991) hypothesized that these post-divorce changes can lead to the long-term difficulties such as, academic problems, low self-concept, and behaviour problems. Post-divorce can look quite different for children and may leave children feeling a sense of loss, guilt and lack of support (Pedro-Carroll, 2011). Amato & Keith (1991) add that a lack of parental models (in social and interpersonal settings) may result in the outcome of childrens’ lack of social skills that are part of social and interpersonal situations. Single-parent homes can lack engagement between two adult role models demonstrating cooperating, communication, and compromising (Amato & Keith, 1991). It is well-known that divorce causes a shift in economic status for individuals. Amato & Keith (1991) suggest that low-income single mothers are unable to offer their children the same educational opportunities as dual-income families. Low-income single mothers may have to send their children to lower income schools that may have a lack of educational supports, materials and staff (Amato & Keith, 1991). In addition to the possibility of attending low-income
schooling, children of divorce are also twice as likely to drop out of high school compared to their two-parent home counterparts (McLanahan & Sandefur, 1994). Zeratsion et al. (2014) found that children whom experience divorce by the age of 15-16 were more likely to smoke cigarettes and use doping agents than their counterparts. Interparental conflict and hostility in the home both pre- and post-divorce can lead to feelings of stress, unhappiness and insecurity for the child (Amato & Keith, 1991). These emotions may also affect the parent-child relationship (Amato & Keith, 1991). Emery (1988) found that children of divorce had more psychological problems compared to a child that had lost a parent. Children of divorce are 50% more likely to develop health concerns than their two-parent home counterparts (Angel & Worobey, 1985). Velez & Cohen (1988) studied suicidal ideation and behaviour in children, and found individuals that come from a single-parent home are almost twice as likely to attempt suicide than those who do not come from that background. The effects of divorce do not end in childhood and adolescence. Amato & Sobolewski (2001) suggest that children whose parents divorce are at an increased possibility for facing psychological problems in adulthood. Wallerstein, Lewis, & Blakeslee (2000) state that adult children of divorce tend to have lower-paying jobs, less college education than their parents, and unstable father-child relationships. Wallerstein, Lewis, & Blakeslee (200) also state a vulnerability to drug and alcohol dependence, fears of commitment and divorce, and negative memories surrounding the legal system.

Parents can feel similar emotions to their children post-divorce, but can also experience feelings of resentment, blame and anger (Ricci, 1980). In general, divorced individuals tend to report less happiness, more mental health problems, social isolation, substance use, and health-related problems than married individuals. Amato (2012) suggests divorce results in a decline in living arrangements, which stems from moving from one household to two. Often times, a parent will have to move as a result of the divorce and that in itself can be a stressful life event. Parents that have primary custody of their children may feel the strain of solo parenting, whereas the parent that moved out may feel the loss of daily contact with children to be destressing (Amato, 2012). Divorced fathers experience more depression than their married counterparts, when their children do not reside with them (Shapiro & Lambert, 1999). Loneliness comes from loss of daily contact from children and a drift from married friends (Amato, 2012). Amato (2012) suggests that since married couples often socialize with other married couples, newly divorced parents can drift away from former friends and feel socially isolated. Interparental conflict can continue well after the finalized divorce, involving child residence and access (Pedro-Carroll, 2011). Amato (2000) felt that divorce was associated with added stressors and a loss of benefits associated with marriage. Marriage can offer individuals emotional and sometimes physical support, a life partner, and economic stability (Amato, 2000). The dissolution of one’s marriage can be a great loss to the individual. That loss can lead to negative effects, such as social isolation, financial issues, substance use and other negative behaviour problems such as smoking (Amato, 2000). Kiecolt-Glaser & Newton (2001) stated notably higher rates of illness, morbidity, and suicide are found in divorced men. Hemstrom (1996) studied the difference in mortality rates in men and women and the link between those rates and marriage dissolution, if any. Results showed that unemployed women, and unskilled male workers are vulnerable in divorce situations (Hemstrom, 1996). Goldman & Hu (1993) stated that in a majority of countries, divorced individuals have the highest mortality rate, followed by widowed individuals, those whom never married, and lastly married individuals.
Current Divorce Services

There are a variety of resources that are accessible for families that have been or are going through a divorce. There are many online options available, such as a guide to children and divorce offered by Galbraith Family Law that provides some basic knowledge about divorce and how involved children can be during the divorce process (Galbraith, 2016). Recent studies demonstrated support for the use of online resources instead of in-person counselling. Specifically, Clarke-Stewart & Brentano (2006) reported that 47% of mothers surveyed would use electronic communication compared to only 16% who reported they would participate in a meeting. This statistic supports the notion that many parents prefer the less invasive and electronic interventions compared to in-person supports. Though it is seen as less invasive, website can lack a therapeutic approach. Most give basic information about divorce and direct users to lawyers, but do not offer any assessment or provide personalized interventions. The lack of an accurate assessment raises the issue of effectiveness. Even with limitations, these types of resources offer support to challenges faced by divorced or separated parents.

Family therapy is a type of counselling designed to address specific problems experienced by the entire family. It is a good resource that focuses on the family as a whole. This therapy resulted from literature showing that parents were not the only factor influencing children’s behavioural issues (Heinrichs & Prinz, 2012). Based on the family systems theory (Carr, 2014), this therapy treats the family as a unit, and expects the family to work together on their issues as a whole. Although this is a good theory to base treatment on, due to the nature of many divorces, it could be difficult to include the entire family due to conflict.

Child-Parent Relationship Therapy (CPRT) is a play-based manualized treatment program for children between the ages of 3 and 10 who are presenting with behavioural, emotional, social and attachment disorders (Taylor, Purswell, Lindo, Jayne, & Fernado, 2011). Based off of Bernard and Louise Guerney’s filial therapy model (Guerney, & Guerney, 1960), therapy focuses on the strengthening of the existing parent-child relationship to influence the child’s adjustment to life’s challenges. Play therapists teach parents how to use child-centered play therapy skills during one-on-one play time with their children (Taylor, Purswell, Lindo, Jayne, & Fernado, 2011). CPRT is similar to the Guerney’s therapy in that the intended therapy is for parents and their small children (3 to 10 years old). The program involves ten, two-hour group parent-training sessions that each parent attends without their child (Taylor, Purswell, Lindo, Jayne, & Fernado, 2011) The session facilitated by a play therapist, teaches parents child-centered play therapy skills, principles and typical child development knowledge (Taylor, Purswell, Lindo, Jayne, & Fernado, 2011). Parents then take that knowledge and skills and practice in 30-minute recorded play time with their child (Taylor, Purswell, Lindo, Jayne, & Fernado, 2011). They will then receive supervision and feedback from group leaders and other parents (Taylor, Purswell, Lindo, Jayne, & Fernado, 2011). The premise of CPRT is that a secure and strong parent-child relationship is a critical factor in the child’s well-being (Taylor, Purswell, Lindo, Jayne, & Fernado, 2011). Taylor, Purswell, Lingso, Jayne, & Fernado (2011) explain in a supportive group setting, parents learn skills to respond more effectively to their child’s presenting needs. While children learn that their parents are reliable and consistent in giving them love, acceptance, safety and security. There is a wealth of literature to support the effectiveness of CPRT with single parents (Bratton & Landreth, 1995). According to Bratton and Landreth (1995) divorced single-parents that participated in CPRT reported statistically significant increases in empathetic behaviour and acceptance of their children. A decrease in
parental stress was also reported for individuals who completed the treatment compared to the control group who did not receive CPRT (Bratton & Landreth, 1995).

**Cognitive Behavioural Therapy**

Cognitive Behavioural Therapy (CBT) describes a reciprocal relationship between an individual’s thoughts, feelings and behaviours. Specifically, it allows clients to examine their negative thoughts, feelings and behaviours, which can lead to a reduction in depression (Siddique, Chung, Brown, & Miranda, 2012), anxiety (Glenn et al., 2013) and anger (Resick, Galovski, Uhlmansiëk, Scher, CLum, & Young-Xu, 2008). All of which are symptoms that could affect how a parent can function, and the relationship with their child. When directing cognitive behavioural therapies at a child’s emotional and behavioural problems, it is important to remember the role family may play.

CBT techniques have shown to be successful for families that are dealing with relationship problems, and stressful life transition such as divorce (Dattilio, 2010). Involving the family gives new perspective and offers an understanding about the child’s worldview and family context (Knight & Ridgeway, 2008). CBT is an evidence-based therapy approach that has demonstrated to be an effective treatment with individuals impacted by divorce (Everett & Lee, 2006). CBT has also shown promising results delivered in a group setting (Everett & Lee, 2006).

**Group Cognitive Behavioural Therapy**

Research has indicated benefits of implementing group-based therapy as an evidence-based, effective, and cost-efficient treatment (Puskar, Mazza, Slivka, Westcott, Campbell & McFadden, 2012), opposed to individual cognitive behavioural therapy. For example, Sanders & McFarland (2000) compared group cognitive behavioural therapy (GCBT), to a behavioural therapy for families dealing with depression and child problem behaviours. Both groups successfully decreased the depression and the child’s disruptive behaviours, however at the six-month follow up the GCBT participants showed concurrent clinically reliable reductions in the targets (Sanders & McFarland, 2000). Some strengths noted were the ability to develop more potential solutions to divorce-related issues, as individuals could draw on other participants for new suggestions and perspectives (Taylor & Cooper, 2008). Clients were also able to pick up other behavioural skills that would not have been readily available in one-on-one therapy (Taylor & Cooper, 2008). The biggest strength in offering GCBT is how cost-effective this therapy is (Taylor & Cooper, 2008). This can be crucial for individuals post-divorce, as financial strain can often accompany divorce. Taylor & Cooper (2008) shared having a financially feasible therapy to target this population makes it more likely that they will receive treatment and will enhance the overall experience. Parent-child relationship is fundamental to a child’s well-being. Lansford argued that inter-parental conflict could negatively affect the child’s well-being more than the divorce itself (as cited in Zemp, Bodenmann, & Cummings, 2017). Zemp, Bodenmann, & Cummings (2017) state that family interventions that address the parent-child relationship and the enrichment of the inter-parental relationship can lead to enhancement of the child’s well-being. Fincham stated that treating the child or the parent-child relationship alone is an incomplete intervention (as cited in Zemp, Bodenmann, & Cummings, 2017). Fincham stated clinicians can overlook the importance of the key element, the marriage and the parents (as cited in Zemp, Bodenmann, & Cummings, 2017). Marriage problems can relate to the child’s problems, and even recognizing this can alleviate some of the child’s behaviours (Zemp, Bodenmann, & Cumming, 2017). A group cognitive behaviour therapy that tailors to both parents’ and children’s needs could bridge the gap that exists in the services. The therapy should
include important cognitive behavioural therapy and applied behaviour analysis topics or skills such as the following:  

**Assertiveness.** Group assertiveness training decreased anger and inappropriate expressions of anger in males compared to a control group receiving no assertiveness training (Rimm, Hill, Brown, & Stuart, 1974). A study comparing individual to group assertiveness training found there is no significant difference between group and individual (Linehan, Walker, Bronheim, Haynes, & Yevzeroff, 1979). However, Linehan, Walker, Bronheim, Haynes, & Yevzeroff (1979) noted that assertiveness training is effective in increasing assertiveness and reducing anger and hostility in participants.  

**Empathic Responses.** Empathic responding is a verbal reflection of feelings and statements that convey understanding the emotional meaning of another person’s communication (Salem, 2003). Parents will learn how to use empathic responses with their children to strengthen the parent-child relationship. Which interim may decrease levels of parental stress, depression and anger and possibly decrease problem behaviour in children. Eyberg, Nelson, & Boggs (2008) believed that parental empathy can reduce children problem behaviour. Improvement in expression of empathy through counselling leads to improvement in relationships between family and decreased family problems (Long, Angera, Carter, Nakamoto, & Kalso, 1999).  

**Positive Scanning.** Positive scanning is an applied behaviour analysis (ABA) technique which entails focusing only on desirable behaviour rather than the unwanted behaviour (ABA Glossary, n.d.). This reinforces positive behaviours more and tends to decrease or extinct the negative behaviour as it is not receiving reinforcement as often as the positive behaviour(s).  

**Distorted Thoughts.** Distorted thoughts, or cognitive distortions arise from a Cognitive-Behavioural Therapy concept, which focus on ways people distort their thinking (Pratt, 2013). Pratt (2013) stated that often these irrational thoughts can lead to emotional and behavioural problems like anxiety, depression, etc. Some common cognitive distortions that exist are all-or-nothing thinking which entails seeing things in a black-and-white matter, if you are anything short of perfection, you are an absolute failure (Pratt, 2013). Pratt (2013) described overgeneralization as seeing a single negative event as a never-ending pattern. Catastrophizing or minimization is exaggerating the importance of things (such as a mess-up), or inappropriately shrinking things (such as your own valuable qualities; Pratt, 2013).  

**Mindfulness.** Mindfulness is a state of active open attention to the present. It means living in the moment and awakening to the current experience instead of dwelling on the past or anticipating what is to come in the future (Mindfulness, n.d.). A recent study stated that the more a parent engages in mindfulness, the more conscious and responsive they are to their child’s needs (Campbell, Thoburn, & Leonard, 2017). The use of mindfulness also strengthens the parent-child relationship and reduces levels of stress for the parent (Campbell, Thoburn, & Leonard, 2017). Esmaeilian, Tahmassian, Dehghani, & Mootabi (2013) found that children of divorce that participated in Mindfulness-Based Cognitive therapy (MBCT) had a reduction in symptoms of depression post-divorce. Esmaeilian, Dehghani, Dehghani, & Lee (2017) later found that the same MBCT intervention significantly decreased not only the experimental group’s depression, but their anxiety and anger and improved their emotional resiliency.  

**Premack Principle.** The Premack Principle is an ABA strategy used to encourage a low-probability behaviour to happen before engaging in a high-probability behaviour by using reinforcement (Meadows, 2001). If behaviour B is more likely to happen than behaviour A, then behaviour A is more likely to happen if behaviour B is contingent upon it (Meadows, 2001). For example, if a child is struggling to do homework, but enjoys riding their bike with an adult, a
parent can say “Timmy, you need to do your homework, then you and I can ride our bikes around the block.”

All of the CBT and ABA components outlined above are evidence-based and presented as being valuable in decreasing symptoms of unwanted stress, anxiety, depression, and anger which is directly beneficial to the divorced-family population.

**Summary of the Literature**

Through reviewing the literature, research shows that children that lack a strong parent-child relationship are likely to have increased challenges that a strong relationship could alleviate (Taylor, Purswell, Lindo, Jayne, & Fernado, 2011). These challenges can include heightened stress, self-blame, loneliness, and behavioural problems (Taylor, Purswell, Lindo, Jayne, & Fernado, 2011). With divorce being a reality for a large population, it is important to find an effective intervention to decrease the child’s behaviour problems and increase the strength of the parent-child relationship. CBT has been an established method and has many beneficial outcomes. GCBT has shown to be effective and current literature supports the idea of focusing on the parent-child relationship (Sanders & McFarland, 2000). It can complement and reinforce the skills and concepts learned in both concurrent groups. The relationship between GCBT may change the parent-child relationship. CBT and ABA components have shown to be beneficial in reducing symptoms of stress, anxiety, depression, and helplessness, which would directly benefit the divorced-family population (Linehan, Walker, Bronheim, Haynes, & Yezzeroff 1979; Long, Angera, Carter, Nakamoto, & Kalso, 1999; Pratt, 2013; and Esmaeilian, Tahmassian, Dehghani, & Mootabi, 2013).

**Relationship Between Literature Review and Current Thesis**

Divorce affects a substantial portion of the population. Following the decision to separate or divorce, many negative effects can impede on both parents and children of divorce. There are current divorce supports in place for this population that are beneficial, however, all have limitations. Many lack the ability for both parent and child to learn a shared curriculum and practice skills together to strengthen the parent-child relationship. CBT is an evidence-based therapy used to change negative emotions, thoughts and behaviour. Group therapy has shown to be beneficial and cost-effective, which has been a barrier to this population accessing services (Puskar, Mazza, Slivka, Westcott, Campbell & McFadden, 2012). The present literature review has shown supporting evidence pertaining to the method and rationale of the current study. The literature supports implementing a GCBT with behavioural rehearsal, CBT, and ABA concepts to improve the parent-child relationship within the divorced or separated parent population.

Word Count: 3364
Chapter III: Methodology

Participants

This manual is intended to be used with the revised second implementation of the RAD program. The manual was designed to be used with a parent experiencing parent-child relationship dysfunction, and an increased amount of stress directly related to being a divorced or separated parent. Parents must also have a child participating in the concurrent session for children of divorce. For what was to be the second integration of RAD, four parents were recruited, along with six children. Due to educational strike, RAD was unable to be implemented. The co-facilitators were two Honours Bachelor of Behavioural Psychology (BBPH) students, under the supervision of a board-certified behavioural analyst, and professor in the BBPH program. Volunteers were also recruited to assist facilitators. All staff in the RAD program have a wealth of knowledge surrounding CBT and ABA techniques and skills. Further training surrounding techniques, assessment measurements, and BST model will be included in procedures for staff.

recruitment procedures. Recruitment of participants was obtained through many local sources. The co-facilitators assembled brochures and flyers (Appendix A) to advertise and provide information on the RAD program, and distributed to local mental health organizations, community counselling centres, family law offices, mediation centres, local fitness centres, and local social assistance buildings. Co-facilitators also attended and presented information packages to a local church group for divorced parents, and a community kids support night. For each of these methods, the RAD email was provided, so that potential participants could contact the co-facilitators. The co-facilitators received both self-referrals and referrals from professionals, facilitators were contacted by email, and responded promptly to every inquiry to determine eligibility to participate.

inclusion criteria. The parental inclusion criteria stated that parents must be divorced or separated, have custody of at least one child that is between the grades of three and seven. Participants must be literate and are able to voluntarily provide informed consent for his or her own participation, as well as written consent for their own child(ren) to participate in the concurrent children sessions. Exceptions stated that grade and age range may be flexible based on assessment from the co-facilitators.

exclusion criteria. Criteria for parental exclusion included any high-conflict divorce situations (such as any relationship that involves violence of any kind). Participants were excluded if they were not divorced or separated, and their they were unable to read or unable to give their consent for themselves or their child(ren).

informed consent procedure. An informed consent form (Appendix B) was created specific to the study for both parent and child participation. Assent was also created for the children participants in appropriate language for the age group that the study outlined. The consent outlined information on the program, its’ risks and benefits and the contact information for all facilitators and the St. Lawrence Research Ethics Board. The research protocol and the consent forms were reviewed and approved by the St. Lawrence College Research Ethics Board on June 28th, 2017.

Design

The manual was created by the author to fulfill requirements of a 14-week field placement as part of an applied thesis in the Honours Bachelor of Behavioural Psychology at St. Lawrence College. The overall design of the manual focuses on Cognitive-Behavioural psychoeducation surrounding both CBT and ABA skills including positive scanning, Premack
Principle, cognitive distortions, cognitive restructuring, relaxation techniques, mindfulness, and behavioural skills training, a review of best practices and research evidence was conducted as a foundation for choosing and outlining the skills used for RAD. It also has a deep focus on communication skills, relationship skills, and the parent-child connection. The manual is intended for facilitation use, it provides facilitators comprehensive instructions on how to implement each weekly session, including directions on how to provide the psychoeducation on the weekly topic, running the activities related to the psychoeducation, direction on how to facilitate discussion surrounding the topic, and finally instructions for the parent-child activity. The manual provides facilitators with any handouts and activities that is needed for each weekly session. The manual was created solely for the facilitator, the sessions are laid out in straightforward terms in order for quick and easy understanding and implementation. The manual also provides absolute consistency of the delivery of the RAD program content.

The program was created by two fourth year Bachelor of Behavioural Psychology students, to go along with the adjacent manual that the students created. The program ran as a pilot project in the fall of 2015, results did not yield any clinical significance. The clinical supervisor that supervised these students wanted to make some changes to the program for another placement opportunity. The co-facilitators then created two whole completely new manuals and made some changes to improve on limitations of the pilot project version.

The second iteration of RAD was set to run fall of 2017, however due to an educational strike within the college, the program was unable to run. Participants were recruited and ready to enroll in the RAD program. The goal of the project then changed from the original goal of data collection to creation of a manual, and updating of the program with no data collection. However, with the recruitment of participants completed, it was mentioned to offer assistance for the next facilitators to understand the process.

Setting and Apparatus
The Restructuring After Divorce sessions are to take place in a quiet classroom at St. Lawrence College, Kingston campus. The room is to be in near distance of another room which would hold the concurrent sessions for the children’s group. Both of the rooms should be big enough to accommodate at least 15 people comfortably, and have access to a media center to engage participants and a white board to facilitate discussions.

Materials
The program requires facilitators to have a manual to run each weekly session, and allows each participant to have the session-specific handouts which includes the activities that are to be conducted during sessions, and any handouts needed for the weekly parent-child activity. Facilitators can photocopy participants the weekly handouts from the manual to eliminate any stress on participants to remember handouts or manuals, and instead just focus on showing up for the sessions. Writing utensils will be provided for each participant, and dry-erase markers are needed to be available for facilitators to record discussion or important notes for participants on the white board at the front of the room. Behaviour bucks will need to be prepared and ready for distribution for the first session for participants to give to their children after demonstration of correct techniques. A treasure box will have to be created prior to the beginning of treatment that children can trade in their behaviour bucks for a prize from the treasure box to reinforce them to partake in the learned techniques from session with their parents.
Measures

Although the manual itself did not test efficacy, the RAD program is designed to have a variety of measures used to collect data on participants and to test overall efficacy. An intake session is to be set prior to treatment beginning to allow participants to complete assessment measures and consent forms. The Functional Assessment Screening Tool (Iwata, DeLeon, & Roscoe, 2013; FAST) will be used as an indirect functional assessment method. It is a self-report checklist to identify some of the conditions the maladaptive behaviour is maintained under. Child of Divorce Questionnaire was created by the author of the children’s edition of the manual, it will be used as a tool to identify some of the thoughts, feelings and behaviours surrounding children of divorce. It will be administrated only to the children’s group. The Parenting Satisfaction Scale (Minus the ex-spousal questions, as the information is irrelevant) will be used to gather data on how satisfied individuals are with being a parent, and their perspective on their parent-child relationship, and it will be used as a pre-and-post measure. The ex-spousal questions were excluded from the assessment package, due to facilitators perceptions of irrelevance. Parents are in the program to work on themselves and their relationship with their child. It hypothesized that some of the question may elevate or trigger anxiety, and stress which was unproductive when the program was targeting lowering stress levels for the parent. A skills inventory (Task Analysis) was developed to perform a pre-and-post-test on the knowledge and skill level of ABA and CBT on both the parent and children groups.

Procedure

The manual is composed of three sections, the introduction of the program, the pre-treatment intake session, and the weekly RAD sessions. The introduction portion of the manual offers facilitators an overview of the Restructuring After Divorce Program including its’ short and long-term outcomes. It supplies users with some psychoeducation on: divorce and its effects on both parents and children and the techniques used within the RAD program. The next portion of the manual is the pre-treatment intake session. This section consists of an overview of the intake session which will commence prior to treatment beginning. Within this portion of the manual the user is given a description of how the session should run, a breakdown of all the assessments and consent forms and the information that should be provided to the participants. The final part of the manual consists of the weekly sessions. This provides users with the entire lesson plan for each session. Each week includes a recap of last week and discussion of behaviour bucks, and how the parents were feeling about the concepts learned and how they are using them within their lives and relationships with their children. The session then turns to discussion of that weeks’ topic to promote participation and to provide facilitators with an idea of the amount of knowledge parents may already have of each topic. It also gives facilitators a segue to connect participants and their thinking to the psychoeducation piece of the session. Psychoeducation is minimal to increase participants behavioural rehearsal time, facilitators are to not be concerned with participants knowing the terms and definitions but be concerned with participants using them and being able to perform them correctly with their children and their everyday lives. An activity surrounding the topic follows to practice the learning and to see what the parents have picked up. Finally, the session concludes with the parent-child activity, which is the bulk of the session. Parents and children will work through an activity or a series of activities together related to the topic and provide them with time for behavioural rehearsal, this will allow facilitators time to walk around and provide feedback to participants so that they can correct themselves before going home where they are encouraged to use the techniques and offer children behaviour bucks for demonstrating techniques.
Chapter IV: Results

Product

The final version of the Restructuring After Divorce Facilitator’s Manual: Adult Edition can be located in Appendix C. The facilitator’s manual was created in order for the Restructuring After Divorce program could be run independently and as a placement opportunity for students in the Honours Bachelor of Behavioural Psychology program. It is to be used in addition with the Children’s Edition of the manual. The manual provides readers with an overview of the Restructuring After Divorce program and specific instructions how to facilitate the pre-treatment intake session, and all weekly sessions. It provides readers with weekly topics, activities and materials for participants, and any additional notes facilitators may require.

Chapter V: Discussion

Summary

The present thesis is to address the gap found in the literature pertaining to a therapy to address the parent-child relationship in the divorced family population. To respond to that need, the purpose of the present thesis was to first re-design a program created for this population and secondly create a manual for facilitation of the group cognitive behaviour therapy (GCBT) sessions for parents of divorce. The creation of a second manual (Mazzeo, 2017) was for concurrent sessions for parents’ children.

The first component of this project consisted of editing an already created program to provide practical knowledge and behavioural rehearsal to promote positive relationships for both parent and child, reduce the stress and other related symptoms associated with being a divorced or separated parent through teaching cognitive-behavioural therapy and applied behavioural analysis techniques. The second component of this project was to create an accompanying manual for facilitators to implement the second integration of the Restructuring After Divorce (RAD) program. The manual was created in an easy to read and follow manner to ensure quality and effectiveness in implementation from different facilitators.

The result of this research was the Restructuring After Divorce program, as a second integration, a 11-week program that offers 10-weeks of therapy for parents and children of divorce. The program provides knowledge on CBT and ABA techniques and behavioural rehearsal together to promote strong and positive parent-child relationships. The creation of the accompanying manual was in preparation for implementation of the program through the college’s research department.

Strengths

When discussing strengths and limitations of this thesis project, there are two areas to examine, the manual itself and the RAD program. Beginning with the manual, the greatest strength is its readability and organization. The design of the manual was to be easy to read, follow and interpret. The manual is laid out session by session. The organization is replicated in each session, and includes all of the necessary materials, activity sheets and psychoeducation lessons. This allows for a facilitator to quickly start the program and have all the materials together. It also allows for different facilitators to run the group as all that is needed is the manual itself to be successful. The manual has also been written in clear concise language, that is easy to read and does not require a substantial amount of interpreting or higher knowledge in behavioural concepts. However, it is detailed enough that a trained individual could implement it
seamlessly and effectively. It is also noted that the program itself fills a need demonstrated by the gaps in the literature and local supports devoted to the divorced population.

Along with its readability, the manual is a full package for both facilitators and participants. Attending a weekly session can be stressful enough for parents, alleviating one less thing (to remember to bring a participant booklet) for parents to do can be appreciated. Facilitators have the ability to photocopy every handout for participants avoiding forgotten handouts and participants missing material and practice.

Lastly, the simplicity of the manual and the materials leave room for facilitators’ creative mind to put a spin on psychoeducation section, activities, and course material. The manual provides users with an overall a guideline and suggestions for activities, however the material can easily be altered to fit facilitators’ wants and participants.

In regard to the program, the strengths of Restructuring After Divorce were found to be the limitations of the pilot project. Data collected from the pilot project presented did not show significance for the parent group, as the assessment measures were not the most appropriate. The assessments were also not able to capture any behavioural skills learned during session. The pilot sessions were created to provide a great amount of psychoeducation and a lesser time was donated to behavioural rehearsal. The method of developed completed by two separate individuals with separate supervisors was a marked limitation. According to Kozloff’s Checklist of Guidelines for Evaluating Research and Research Claims (2006), the pilot project was accomplished research. However, the small sample size reveals it as level one research which is not seen as effective (Kozloff, 2006). The design of the research is questioned as the instruments used to collect data were not proper in regards to the research question, which could be in direct correlation with the lack of supporting data. Kozloff (2006) questions the research when one measure is used to collect data for outcome variables, the pilot project used multiple measures, however, lacked multiple measures for each dependent variable. Therefore, only had one measure for parental stress, and one for parent-child relationship. Due to a small sample size, it is difficult to acknowledge a representation of the divorce parent population, nonetheless the project did provide an explanation for the small sample size. Lastly, Kozloff (2006) provides explanation on writer’s claims in relation to the evidence provided, the pilot project encouraged the method to be replicated, though little evidence was produced for the parental group to state such claim. Nonetheless, limitations were explored and were improved upon to replicate and revamp the program. From these limitations, strengths were created during what was to be the second integration of the program.

The greatest strength of the Restructuring After Divorce program is the simple behaviourism of the program. With the pilot project focusing on the psychoeducation piece and yielding little results, the main focus for the second integration was the behavioural rehearsal. Participants need little psychoeducation on the concepts, and more time practicing the concepts as to increase the likelihood of using it in their nature environment and feeling comfortable doing so. Another behavioural strength is the behaviour rehearsal portion of the program is taught using behavioural skills training, so each participant is able to see an example of the concepts being used, and also receive feedback from facilitators during their parent-child role plays. Therefore, furthering the encouragement to master the skills and use them in their natural environments.

The use of measurement is also noted as a strength. The program has developed several key measurement tools to be more likely of obtaining data to support the thesis statement. Data collection is also available throughout the program, and will not be featured in only the pre-
treatment interview, but throughout the sessions and will include data on skill level of each participant. This will optimistically show levels of mastery of the behavioural skills being taught.

Lastly, a strength of the Restructuring After Divorce program are the skills taught. Not only are they beneficial to the parent-child relationship and the family unit, but also to the individuals themselves. The possible generalizability of the skills taught in each session may also impact further relationships with others outside the parental relationship. This encourages the continued use of the skills, as well as the positive reinforcement that could come out of the various skills learned.

**Limitations**

As with all good things, limitations exist and create obstacles in expectations, ability and performance. There are several limitations worth noting within the Restructuring After Divorce manual. The first noted limitation is, equally, also one of its strengths in that the manual does not provide a great amount of structure within the sessions. Facilitation can require resources and planning to offer further psychoeducational lessons, handouts and activities for participants. This can be seen as a creative opportunity but can also be a great deal of work for facilitators.

In addition, another limitation is the elimination of participant workbook from the pilot project. This can create an unnecessary amount of work for facilitators, who already have a great amount of responsibility. The elimination requires facilitators to photocopy all participants handouts, what can be seen as a strength for participants can also be seen as a limitation for facilitators.

Lastly, due to the program being concurrent sessions for both parents and children of divorce, two manuals are required along with two separate facilitators. Therefore, the manuals are created closely together, however they are authored by two separate individuals. This can be seen as a limitation due to differences in explaining concepts and writing styles. The co-facilitators and authors of the program worked closely to try and combat that limitation. The two manuals were written together, all materials were shared for both manuals to use, and any changes were made together.

Limitations, as they relate to the program are also worth noting. The first limitation is marketing, which can relate to small sample size. Marketing is a key part in the research process and should be started a great time in advance. As a new therapy option, the program needs to be put out there and allow for as many people to be aware of the program. This will maximize chances of having a decent sample size. According to Kozloff (2006) sample size directly influences research claims.

In addition to Kozloff’s recommendations to sample size, it is also recognized that having a control or comparison group, however due to the nature of the population it can be seen as an ethical issue to have a control group. However, further research on this limitation may conclude changes to incorporate a control group.

Lastly, and perhaps the biggest limitation is the hypothetical nature of the program, as it has yet to be tested. The trial of the program was set to be run in October 2017 was cancelled due to unforeseen circumstances, however the program remains theoretically sound and supported by the literature, yet not tested practically.

**Multilevel Challenges**

There are multiple opportunities where treatment is bound to be vulnerable to challenges. There are four areas that always require attention, being the client, program, organization, and societal level. Within each level, challenges are distinctive, yet provide a holistic picture of the
barriers and obstacles associated with a certain population or treatment. The analysis is based on the multilevel challenges associated with this thesis.

**Client level.** Timing can be a huge challenge for the target population. Most participants will have jobs, and other commitments that yield their attention. Picking the best time in a week that will be the least interfering with other responsibilities is important. As an 11-week program that runs weekly for 90 minutes can be seen as a huge commitment for an already stressed single parent. Furthermore, participants must commit as a dyad (parent and child). Finally, resistance is to be expected when learning new skills, resistance as a family (dyad) can greatly impact an experience and success level.

**Program level.** At the program level, the classroom can be seen as a non-therapeutic setting, and provide to be counter-productive for both facilitators and clients. Ensuring sessions match the participant’s needs and ensuring the information is geared toward them can be a challenge. Lastly, the facilitators’ skill level not just on the material and offering group therapy, but with their ability to roll with resistance, and obstacles that may come up in session.

**Organizational level.** The biggest challenge that exists at the organizational level is funding and being funded by the college’s research centre. A project like this requires a vast amount of marketing including presentations, flyers/brochures, advertisements, and interviews, etc. However stressful, this is a valuable and rewarding part of applied research.

**Societal level.** Finally, at the societal level there are a few particular areas where the program and this thesis encountered challenges, mostly involving public opinion and ways of thinking. The concept of focusing on the relationship between parent and child can be seen as unnecessary and unneeded. Beliefs surround the ability to change a relationship as solely up to the parent, or even concrete; as parents and child either have a solid relationship or they do not. Convincing people to change their way of thinking has been proven to be difficult. This leads directly into the next challenge of public opinion, parents that agree to the treatment may feel judged by society because they need help to foster a relationship with their child, or that signing up is a direct commentary on how their family life is, and their inability to parent their child.

Effectively supporting complex client needs, flexibility within delivery of program materials, fighting for funding, and societal stigma are examples of the types of challenges that can develop while working with the divorced population. Being aware and addressing these challenges as best as possible can allow for greater chance for success of participants and making notable changes in the lives of those that need it.

**Recommendations for Future Research**

In itself the Restructuring After Divorce program is a possible future research opportunity. However, there are other recommendations that ought to be explored. Each limitation can be seen as a recommendation for future facilitators.

Recommendations in regard to the manual mirrors the limitations. Future facilitators should add more material to the manual to allow more information and resources for both participants and facilitators. It may also be helpful to create a participant workbook if it seems fitting. For future changes to both manuals, it is recommended that one author creates both manuals to eliminate the difference resulting from two separate authors.

In regard to the program there are a few recommendations for future research. Facilitators should start marketing as soon as possible, inquire about opportunities to have marketing personnel to assist in this aspect. As Kozloff suggests, the program could be redesigned to incorporate a control or comparison group validate data in relation to the success of the program.
Contributions to the Field of Behavioural Psychology

Any effort to create something new or something that reiterates a well-tested theory offers some sort of growth to the field of behavioural psychology. The Restructuring After Divorce program accomplished a bit of both. The first way it contributes is it has reiterated the significance for behavioural therapies for the divorced population that are both cost-efficient and effective. Currently, there are no services that provide a joint therapy for parent and child, so Restructuring After Divorce fills a gap that currently exists in the local services offered. Secondly, with the program created and completely manualized, once tested, the program is essentially ready to improve the relationships between divorced parents and their children. Lastly, the program is also highly interchangeable, meaning it could be used strictly as an educational material used by the college, or could be used by a number of local agency to deliver to their clients.

The Restructuring After Divorce program is a simple behavioural idea, which can sometimes be quite difficult to accomplish in the midst of a divorce. The program focuses on the ability to be mindful of the most important thing in life, our relationships and our family.


Appendices
Appendix A

RAD Recruitment Flyer

“Even a minor event in the life of a child is an event of that child’s world and thus a world event.”

If you have any questions about the program, or if you wish to participate, please contact the facilitators by emailing us at RADGroup@sl.on.ca

What is RAD?
The Restructuring After Divorce (RAD) program offers free 11-week cognitive behavioural group therapy for any divorced or separated parent and his/her children. The goal of the program is to help improve the relationships between parent and children, reduce the stress associated with being a divorced parent, and improve children’s coping and communication skills. Registration is currently open. Sessions begin October 11th 2017.
Appendix B

Consent Form

Project Title: Group Cognitive Behavioural Therapy to Improve Parent-Child Relationships for Divorced Families
Principal Investigator: Bobbie-Ann Medeiros
Name of Supervisor: Colleen Cairns
Name of Institution: St. Lawrence College

Invitation
You are being invited to take part in a research study. I am a 4th year student in the Honours Bachelor of Behavioural Psychology program at St. Lawrence College. As a part of the program, I am completing a research project (called an applied thesis). I would like to ask you for your help to complete this project. This form provides you information that will help you understand my project. Please read all of the information carefully and ask any questions you may have before you decide if you want to take part.

Why is this research study being done?
My project is on the Group Cognitive Behavioural Therapy to Improve Parent-Child Relationships for Divorced Families – a program that is meant to help divorced or separated parents manage their stress and build stronger relationships with their children. This project also offers your child(ren) the opportunity to take part in a parallel program if they are between grades three and seven. This age range is the most at risk for divorce-related programs. It was also chosen to ensure children are able to understand, and participate in the program. The parallel program is described in a separate consent form which you will need to review and return to consent for your child(ren) to attend. This study is being done because academic literature indicates that the negative outcomes of divorce can affect both parents and children’s mental health and children’s social development. Therefore, there is a need to study programs (like this one) to determine an effective treatment option for families dealing with divorce. We believe that by offering psychoeducation on cognitive behavioural therapy, effective communication, and healthy relationships and by practicing these practical solutions alongside your child, will facilitate better interactions with your child(ren) and lower levels of stress symptoms. This program has been approved by the Research Ethics Board at St. Lawrence College, and has received funding through the Centre of Education in Behavioural Research and Intervention in the Community.

What will you need to do if you take part?
If you decide to take part in this study, you will be asked to complete two questionnaires, once before we begin the program and again when we are finished with the program. The program consists of 10 weekly group sessions with one pre-interview session for pre-treatment assessment. These sessions will be held Wednesday nights from 6:30 p.m. till
8:00 p.m. at the St. Lawrence College Kingston campus. During each session, you will be asked to participate in discussions, role-plays, and parent-child activities. Between each session, you will be asked to complete assigned activities with your child.

**What are the potential benefits of taking part?**

Benefits of taking part in this research study may include:
- You may learn to be aware of your thoughts, emotions, and behaviours surrounding your divorce situation.
- You may gain access to support and resources.
- You may gain practice your new skills in a safe environment.
- You may learn to better communicate with your ex-spouse and your children about difficult topics related to divorce.
- Your child may benefit from a better relationship with you.
- Your participation may allow for meaningful information to be collected in order to further improve the program for future running.
- Your participation may add to the knowledge of the behavioural psychology field.
- The research gathered may help evaluate the effectiveness of the program.
- Your participation will help me complete my applied thesis research project, and add to my educational career.

**What are the potential risks of taking part?**

Risks from taking part in this research study are minimal but may include:
- You may be exposed to sensitive discussions that may cause you to have feelings of anger, sadness, or fear/anxiety.
- You may be exposed to group members who you may not get along with.
- Your child may wish to withdraw from the program and his/her decision requires respect and support. The child should not be forced into attending.
- Due to the parent-child activities, if you withdraw, your child will not be able to continue his/her sessions.
- To reduce the likelihood of participants might share private information obtained from other participants, each participant will be asked to sign a confidentiality agreement. Also, only those that decide to share personal information may do so but it will never be a requirement of the intervention.
- In the event of a participant experiencing adverse emotions during the session, the college supervisor will immediately and discretely invite the participant to speak with them privately in their office.
- All participants will be made familiar with St. Lawrence College’s safety procedures that are posted in each classroom.

**What happens if something goes wrong?**

Everyone is different, and may react to the program or questionnaires differently. You may talk to me, or the co-facilitator Janet Richie. If you require further assistance, myself or Janet will direct you to the appropriate resources.

**Will my information that is collected from this project be kept private?**

We will make all attempts to keep any information that identifies you strictly confidential unless required by law. You will be assigned a code number to enter on the
questionnaires. The consent forms will be kept in a locked filing cabinet in my clinical thesis supervisor Colleen Cairns locked office at St. Lawrence College for a minimum of 10 years. The computer files with the study data will be kept in a password protected file on a secure password protected computer, that only the facilitators will have access to. All study documents and results will be kept securely for 7 years after which they will be destroyed. Your name and any other identifying information will not be used in any reports, publications, or presentations resulting from this project.

**Do I have to take part?**

Taking part in this research project is **completely voluntary.** It is up to you to decide if you would like to take part in this project or not. If you do decide that you would like to take part, you will be asked to sign this consent form. You are free to stop attending the sessions at any time. If you miss one session, you will be contacted by myself to see if you plan to continue. If you are planning on not continuing, you will need to provide verbal confirmation by phone to one of the facilitators informing them you will be withdrawing from the program. If so, due to the nature of parent-child activities, your child will not be able to continue in their sessions. Each participant will be ensured that they have the right to withdraw at any time and any other services in use will not be affected by withdrawing from this study. They may also request to have any of their data removed from the study bank and these requests will be honored. If you do not wish for your data to be used in the research, please let Bobbie-Ann Medeiros or Janet Ritchie know.

**Contact for further information**

This project has been reviewed and approved by the Research Ethics Board at St. Lawrence College. The project will be developed and implemented under the supervisor of Janet Ritchie and Colleen Cairns, my supervisors from St. Lawrence College. I appreciate your cooperation and if you have any additional questions or concerns, feel free to ask me at BMedeiros31@student.sl.on.ca. You can also contact my co-facilitator at JRitchie@sl.on.ca, as well as my college supervisor at CCairns@sl.on.ca or you may also contact the St. Lawrence College Research Ethics Board at reb@sl.on.ca

**Consent**

If you agree to take part in this research project, please complete the following form and return it to me as soon as possible. A copy of this signed document will be given to you for your own records. An additional copy of your consent will be retained at St. Lawrence College.

By signing this form, I agree that:

- ✓ The study has been explained to me.
- ✓ All my questions were answered.
- ✓ Possible harm and discomforts and possible benefits of this study have been explained to me.
- ✓ I understand that I have the right not to participate and the right to stop at any time.
- ✓ I am free now, and in the future, to ask any questions I have about the study.
- ✓ I have been told that my personal information will be kept confidential.
- ✓ I understand that no information that would identify me will be released or printed without asking me first.
- ✓ I understand that I will receive a signed copy of this consent form.
✓ I understand that the data from this study will be presented at the St. Lawrence College Behavioural Psychology Poster Gala, and may be reported at other conferences or published in a scientific journal. No identifying information will be included in these reports.

I hereby consent to take part.

<table>
<thead>
<tr>
<th>Participant Name</th>
<th>Signature of Participant</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Student Name</td>
<td>Signature of Student</td>
<td>Date</td>
</tr>
</tbody>
</table>
Child Assent Script

Hello, my name is Dakota and I am a student at St. Lawrence College. I am completing a project and I could use your help. The project I am working on tries to help families who are going through separation or divorce. If you want to help me with my project, the sessions we spend together will include talking about your thoughts, feelings and what you have experienced during your parent’s divorce or separation. We will also complete activities together with other children, as well as meet with your parents and complete an activity with them. If you agree to help me with this project I will ask you to complete some questions, this will not take long. I will then meet with you, and a group of other children who have experienced their parent’s divorce. This will happen once every week on Wednesday for about an hour and a half for 11 weeks. Every session we will talk about everyone’s thoughts and feelings towards divorce, play some board games, and then we will meet with everyone’s parents and play in a fun activity. On our last week together we’re going to fill out some more questions. Hopefully spending some time with others who have experienced their parents’ divorce or separation will help you feel a bit better about it.

If you have any questions or issues during our sessions let me, your parents, or another program leader know in private. It is your choice to take part or not. If you want to stop just let me or your parents know at any time. Do you have any questions for me?
Do you want to start?
Restructuring After Divorce

Developed by: Bobbie-Ann Medeiros, 2018
Bachelor of Behavioural Psychology Honours, BBPH
In Partnership with: St. Lawrence College & Centre for Behavioural Studies

*This manual is to not be published, distributed, or shared without the permission of the author. *
# Table of Contents

<table>
<thead>
<tr>
<th>Part I: Introduction</th>
<th>.................................................................</th>
<th>3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Restructuring After Divorce</td>
<td>........................................................................</td>
<td>4</td>
</tr>
<tr>
<td>Part II: Pre-Treatment Intake Session</td>
<td>.......................................................................</td>
<td>6</td>
</tr>
<tr>
<td>Consent Forms</td>
<td>.....................................................................</td>
<td>11</td>
</tr>
<tr>
<td>Part III: Weekly Sessions</td>
<td>........................................................................</td>
<td>16</td>
</tr>
<tr>
<td>Positive Scanning</td>
<td>..................................................................</td>
<td>17</td>
</tr>
<tr>
<td>Coping Strategies</td>
<td>..................................................................</td>
<td>24</td>
</tr>
<tr>
<td>Cognitive Behavioural Therapy Overview</td>
<td>.........................................................</td>
<td>30</td>
</tr>
<tr>
<td>Cognitive Distortions</td>
<td>.................................................................</td>
<td>37</td>
</tr>
<tr>
<td>Dealing with Emotions</td>
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<td>43</td>
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<tr>
<td>Relaxation/Mindfulness</td>
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<td>47</td>
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<td>Premack Principle</td>
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<td>53</td>
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<tr>
<td>Forgiveness/Moving On</td>
<td>....................................................................</td>
<td>58</td>
</tr>
<tr>
<td>Problem-Solving</td>
<td>....................................................................</td>
<td>61</td>
</tr>
<tr>
<td>Termination, Evaluation, and Assessment</td>
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<td>66</td>
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Part I

Introduction to RAD

“Even a minor event in the life of a child is an event of that child’s world and thus a world event.”
Restructuring After Divorce Program

This manual is created for facilitation of the Restructuring After Divorce Program (RAD). This program is accompanied by two manuals: the adult edition in which you are reading and secondly the children’s facilitator’s manual, *Restructuring After Divorce Program Manual: Children’s Edition* (Mazzeo, 2017). This is the second installment of the program, and has been revised since the first implementation. The RAD program runs a total of 11-weeks, and each session is 90-minutes in length. The session is divided into two major parts: the first 45-minutes are done as a parent group only, then the second half of the session is devoted to bringing parents and children together to work through an activity related to the psychoeducation topic taught that session. Each session begins with a discussion surrounding the topic to facilitate participation and ideas surrounding the topics. Psychoeducation is taught and offers a period of rehearsal for parents to participate in an activity on their own. Lastly, parents and children come together to work on the skill taught in session and work on developing or increasing a parent-child relationship. It should be noted that for RAD to run at the highest efficacy, there should be a 1:1 ratio of RAD staff to participants.

The program was established in response to the gap in services offered to the divorced family population who are experiencing elevated stress and difficulty managing the interpersonal relationships specifically with their children. The program is uniquely delivered in a concurrent curriculum for both parents and his/her child(ren) in a method that is age-appropriate and ensure both groups learn, practice and apply the same skills during the parent-child
activity, thereby increasing the odds of mastery over the skills taught, continuing
the use with children outside class, and lasting positive outcomes.

As a facilitator running this program remember the treatment goals are to
increase parent-child relationship and decrease parental stress associated with
being a divorced or separated parent, all of which will be measured through data
collection. However, never underestimate the evidence of treatment success
which is not as easily collected and presented, such as participant feedback.
Positive feedback from participants is just as important if not more important
than the data. Research is important however within the helping profession, we
are concerned with people. We want to know our participants are comfortable,
enjoying the experience, and are learning useful skills. Lastly, as the facilitator
enjoy the program, pour yourself into it, and have fun with your participants. We
know when we are dedicated to the education that we teach we are able to make
authentic connections with our groups as they are making those connections too.
Part II
Pre-Treatment Intake Session
Pre-Treatment Intake Session

This session is thought to be the most important session. For participants, this session is the first impression of the Restructuring After Divorce Agenda:

➢ Welcome
➢ Facilitator Introductions
➢ Program Overview
➢ Consent and Assent
➢ Parental Pre-Treatment Assessments
➢ Questions

Materials:

➢ Writing Utensils (Pens/Pencils)
➢ Refreshments
➢ Consent Forms and Assent Script
➢ Functional Assessment Screening Tool
➢ Parenting Satisfaction Scale (Minus the Ex-Spousal Section)
➢ Skills Inventory (Task Analysis)

Setting:

The pre-treatment intake session must take place in a quiet and secluded classroom at St. Lawrence College, Kingston campus. The room will remain the same for the duration of the program. The room will be beside
another classroom which will hold the concurrent sessions for the children.

Ensure participants are aware of:

➢ Location of bathrooms
➢ Location of fire exits
➢ Location of water fountains, and food/drink vending machines
➢ Location of the designated smoking areas
➢ Location of parking, and parking details

Session Description:

1. Welcome participants to session, and thank them for attending.
   a. An optional step is to offer participants refreshments

2. An introduction of facilitators of the RAD program, and any volunteers that will be partaking in weekly sessions.

3. Provide praise to participants in taking a step forward towards strengthening their parent-child relationship, increasing their physical and mental health, as well as decreasing the stress levels related to being a divorced parent or child.

4. Deliver a brief overview of the RAD program.
   a. Provide participants with an outline of RAD’s ten weekly sessions (see Figure 1).

5. Provide participants the consent forms for the RAD program (both for parent and child), as well as obtain assent for children to participant. Work through the consent forms, and go over the material with the participants, it is critical that they understand these forms before signing. Also allow time for participants to ask questions regarding the program.
a. One of the facilitators must go photocopy consent forms for the participants to take with them.

6. Child group then goes to the next classroom to allow participants to fill out assessment measures. Parents are provided an adequate amount of time to complete the Functional Assessment Screening Tool on their children’s behaviour, the Parent Satisfaction Scale on their own feelings and satisfaction levels of being a parent, and finally the task analysis to obtain a level of knowledge of Cognitive Behavioural Therapy and Applied Behaviour Analysis techniques.

7. Once assessments are completed and handed back, ensure participants have a copy of the consent forms and all the needed contact information for facilitators and confirmation of the start date of the program.

8. Provide time for any other questions, or concerns, and thank participants for coming.
Week One
➢ Positive Scanning

Week Two
➢ Cognitive Coping Cards

Week Three
➢ Cognitive-Behavioural Therapy Overview

Week Four
➢ Cognitive Distortions

Week Five
➢ Dealing with Emotions

Week Six
➢ Relaxation/Mindfulness

Week Seven
➢ Premack Principle

Week Eight
➢ Forgiveness/Moving on

Week Nine
➢ Problem-Solving

Week Ten
➢ Termination and Evaluation

Figure 1. Session Breakdown
Consent Form

Project Title: Group Cognitive Behavioural Therapy to Improve Parent-Child Relationships for Divorced Families

Principal Investigator: Bobbie-Ann Medeiros

Name of Supervisor: Colleen Cairns

Name of Institution: St. Lawrence College

Invitation

You are being invited to take part in a research study. I am a 4th year student in the Honours Bachelor of Behavioural Psychology program at St. Lawrence College. As a part of the program, I am completing a research project (called an applied thesis). I would like to ask you for your help to complete this project. This form provides you information that will help you understand my project. Please read all of the information carefully and ask any questions you may have before you decide if you want to take part.

Why is this research study being done?

My project is on the Group Cognitive Behavioural Therapy to Improve Parent-Child Relationships for Divorced Families – a program that is meant to help divorced or separated parents manage their stress and build stronger relationships with their children. This project also offers your child(ren) the opportunity to take part in a parallel
program if they are between grades three and seven. This age range is the most at risk for divorce-related programs. It was also chosen to ensure children are able to understand, and participate in the program. The parallel program is described in a separate consent form which you will need to review and return to consent for your child(ren) to attend. This study is being done because academic literature indicates that the negative outcomes of divorce can affect both parents and children’s mental health and children’s social development. Therefore, there is a need to study programs (like this one) to determine an effective treatment option for families dealing with divorce. We believe that by offering psychoeducation on cognitive behavioural therapy, effective communication, and healthy relationships and by practicing these practical solutions alongside your child, will facilitate better interactions with your child(ren) and lower levels of stress symptoms. This program has been approved by the Research Ethics Board at St. Lawrence College, and has received funding through the Centre of Education in Behavioural Research and Intervention in the Community.

What will you need to do if you take part?

If you decide to take part in this study, you will be asked to complete two questionnaires, once before we begin the program and again when we are finished with the program. The program consists of 10 weekly group sessions with one pre-interview session for pre-treatment assessment. These sessions will be held Wednesday nights from 6:30 p.m. till 8:00 p.m. at the St. Lawrence College Kingston campus. During each session, you will be asked to participate in discussions, role-plays, and parent-child activities. Between each session, you will be asked to complete assigned activities with your child.

What are the potential benefits of taking part?

Benefits of taking part in this research study may include:

- You may learn to be aware of your thoughts, emotions, and behaviours surrounding your divorce situation.
- You may gain access to support and resources.
- You may gain practice your new skills in a safe environment.
• You may learn to better communicate with your ex-spouse and your children about difficult topics related to divorce.
• Your child may benefit from a better relationship with you.
• Your participation may allow for meaningful information to be collected in order to further improve the program for future running.
• Your participation may add to the knowledge of the behavioural psychology field.
• The research gathered may help evaluate the effectiveness of the program.
• Your participation will help me complete my applied thesis research project, and add to my educational career.

**What are the potential risks of taking part?**

Risks from taking part in this research study are minimal but may include:

• You may be exposed to sensitive discussions that may cause you to have feelings of anger, sadness, or fear/anxiety.
• You may be exposed to group members who you may not get along with.
• Your child may wish to withdraw from the program and his/her decision requires respect and support. The child should not be forced into attending.
• Due to the parent-child activities, if you withdraw, your child will not be able to continue his/her sessions.
• To reduce the likelihood of participants might share private information obtained from other participants, each participant will be asked to sign a confidentiality agreement. Also, only those that decide to share personal information may do so but it will never be a requirement of the intervention.
• In the event of a participant experiencing adverse emotions during the session, the college supervisor will immediately and discretely invite the participant to speak with them privately in their office.
• All participants will be made familiar with St. Lawrence College’s safety procedures that are posted in each classroom.
What happens if something goes wrong?

Everyone is different, and may react to the program or questionnaires differently. You may talk to me, or the co-facilitator Janet Richie. If you require further assistance, myself or Janet will direct you to the appropriate resources.

Will my information that is collected from this project be kept private?

We will make all attempts to keep any information that identifies you strictly confidential unless required by law. You will be assigned a code number to enter on the questionnaires. The consent forms will be kept in a locked filing cabinet in my clinical thesis supervisor Colleen Cairns locked office at St. Lawrence College for a minimum of 10 years. The computer files with the study data will be kept in a password protected file on a secure password protected computer, that only the facilitators will have access to. All study documents and results will be kept securely for 7 years after which they will be destroyed. Your name and any other identifying information will not be used in any reports, publications, or presentations resulting from this project.

Do I have to take part?

Taking part in this research project is completely voluntary. It is up to you to decide if you would like to take part in this project or not. If you do decide that you would like to take part, you will be asked to sign this consent form. You are free to stop attending the sessions at any time. If you miss one session, you will be contacted by myself to see if you plan to continue. If you are planning on not continuing, you will need to provide verbal confirmation by phone to one of the facilitators informing them you will be withdrawing from the program. If so, due to the nature of parent-child activities, your child will not be able to continue in their sessions. Each participant will be ensured that they have the right to withdraw at any time and any other services in use will not be affected by withdrawing from this study. They may also request to have any of their data
removed from the study bank and these requests will be honored. If you do not wish for your data to be used in the research, please let Bobbie-Ann Medeiros or Janet Ritchie know.

**Contact for further information**

This project has been reviewed and approved by the Research Ethics Board at St. Lawrence College. The project will be developed and implemented under the supervisor of Janet Ritchie and Colleen Cairns, my supervisors from St. Lawrence College. I appreciate your cooperation and if you have any additional questions or concerns, feel free to ask me at BMedeiros31@student.sl.on.ca. You can also contact my co-facilitator at JRitchie@sl.on.ca, as well as my college supervisor at CCairns@sl.on.ca or you may also contact the St. Lawrence College Research Ethics Board at reb@sl.on.ca

**Consent**

If you agree to take part in this research project, please complete the following form and return it to me as soon as possible. A copy of this signed document will be given to you for your own records. An additional copy of your consent will be retained at St. Lawrence College.

By signing this form, I agree that:

- ✓ The study has been explained to me.
- ✓ All my questions were answered.
- ✓ Possible harm and discomforts and possible benefits of this study have been explained to me.
- ✓ I understand that I have the right not to participate and the right to stop at any time.
- ✓ I am free now, and in the future, to ask any questions I have about the study.
- ✓ I have been told that my personal information will be kept confidential.
- ✓ I understand that no information that would identify me will be released or printed without asking me first.
I understand that I will receive a signed copy of this consent form.

I understand that the data from this study will be presented at the St. Lawrence College Behavioural Psychology Poster Gala, and may be reported at other conferences or published in a scientific journal. No identifying information will be included in these reports.

I hereby consent to take part.

<table>
<thead>
<tr>
<th>Participant Name</th>
<th>Signature of Participant</th>
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<table>
<thead>
<tr>
<th>Student Name</th>
<th>Signature of Student</th>
<th>Date</th>
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</table>
Child Assent Script

Hello, my name is Dakota and I am a student at St. Lawrence College. I am completing a project and I could use your help. The project I am working on tries to help families who are going through separation or divorce. If you want to help me with my project, the sessions we spend together will include talking about your thoughts, feelings and what you have experienced during your parent’s divorce or separation. We will also complete activities together with other children, as well as meet with your parents and complete an activity with them. If you agree to help me with this project I will ask you to complete some questions, this will not take long. I will then meet with you, and a group of other children who have experienced their parent’s divorce. This will happen once every week on Wednesday for about an hour and a half for 11 weeks. Every session we will talk about everyone’s thoughts and feelings towards divorce, play some board games, and then we will meet with everyone’s parents and play in a fun activity. On our last week together we’re going to fill out some more questions. Hopefully
spending some time with others who have experienced their parents’ divorce or separation will help you feel a bit better about it.

If you have any questions or issues during our sessions let me, your parents, or another program leader know in private. It is your choice to take part or not. If you want to stop just let me or your parents know at any time.

Do you have any questions for me?

Do you want to start?
Part III

Weekly Sessions
Session One: Positive Scanning

Agenda:

➢ Welcome
➢ Ice Breaker
➢ Behaviour Bucks Explanation
➢ Positive Scanning Discussion
➢ Psychoeducation
➢ Parental Activity
➢ Parent-Child Activity

Materials:

➢ Writing Utensils (Pens/Pencils)
➢ Refreshments
➢ M&M’s and Bowl for Ice Breaker
➢ Photocopies of the Parent-Child Activity for participants
➢ Lined paper
➢ White board with dry-erase markers
➢ Behaviour Bucks and Treasure Box

Setting:
The session will take place in a quiet comfortable St. Lawrence College classroom, with another classroom right beside it for the children’s group.

**Session Description:**

1. Welcome participants to session, and thank them for attending.
   a. An optional step is to offer participants refreshments
2. An introduction to the ice breaker activity. Facilitator to get the activity together while participants come together (a circle).
3. Provide participants with explanation and purpose of behaviour bucks and the treasure box. Familiarize participants to what they look like, the program, and examples of when they could give out behaviour bucks to their children.
4. Hold a brief discussion about positive scanning.
5. Provide participants psychoeducation surrounding positive scanning, a standard definition as well as the purpose and benefit of using this technique.
6. Parental activity and discussion. Allow parents to have a short activity and discussion before children join to ensure material was straightforward and understood by participants.
7. Parent-Child Activity, facilitators must use the BST method (instruction, model, rehearsal, and feedback) to instruct participants on activity.
8. Provide time for any questions, or concerns, remind participants about the behaviour bucks system and thank participants for coming.
Ice Breaker Activity (10 Minutes):

Step One: Facilitator will put M&M’s in the bowl.

Step Two: Facilitator will write a legend on the board of categories that are associated with each colour.

Step Three: Bowl will be passed around starting with facilitator, each person will grab an M&M.

Step Four: Taking turns participants will answer the category that corresponds with the colour of M&M they chose.

a) Red: Favourite Superhero
b) Orange: Favourite Food
c) Blue: Favourite Outdoor Activity
d) Green: Favourite Sport
e) Brown: Favourite TV Show
f) Yellow: Favourite Thing About Your Child

Step Five: Facilitator to ensure all participants have a chance to speak and participant in the activity.

Behaviour Bucks Explanation (30 Minutes):
Behaviour Bucks are an essential part to the Restructuring After Divorce Program. The Behaviour Bucks are used as reinforcement for children to engage in the behavioural techniques taught during sessions with their parents. Parents are taught to reinforce their child(ren) with one buck for each time they engage in the techniques. The child must engage in a behavioural technique, and do so correctly to receive the buck. Once a child has received seven behaviour bucks, during the beginning of the next session they will be able to trade in their behaviour bucks for a more potent reinforcer from the treasure box. The treasure box will contain a variety of small activities and toys enjoyed by children in the age range of the group. Each session after the first session will begin with a recap of weeks’ events, parents will discuss how parent and child interacted using the behavioural techniques, and if parents had given out any behaviour bucks. A reminder at the end of each session will occur reminding parents to seek out opportunities to deliver behaviour bucks to their child(ren).

**Positive Scanning Lesson (15 Minutes):**

**Discussion (5-Minutes)**

As a facilitator open the session with asking parents what they know about positive scanning already to get a feel of how much psychoeducation will be needed and the knowledge level of your participants. Start by asking parents what is positive scanning, follow with discussion about why it may be helpful for a parent to use this technique.

**Psychoeducation (5-Minutes)**

Positive Scanning Handout (See Figure 2)
Activity (5-Minutes)

As a facilitator pre-record a short 3-minute video of a “parent and child” interacting. Give parents a lined piece of paper to record as many positive behaviours as they can.

Discussion (5-Minutes)

Start a small discussion about positive scanning, ask parents if they see their child(ren) engaging in any of these behaviours, and why do they think it is more important to look at positive behaviours over negative ones?

Parent-Child Activity (30-Minutes):

The children group will join parents in the classroom to engage in the parent-child activity. The facilitators are to provide the activity using the behavioural skills training method (instruction, model, rehearsal, and feedback).

*Instruction:* Pick a scenario from the table (one for parent, and one for child) and act it out for the other and try to use positive scanning and successfully identify the positive behaviour.

*Model:* Facilitators will assume roles of parent and child and engage in the activity.

*Rehearsal:* Participants engage in activity.

*Feedback:* Facilitators and volunteers will go around the room answer any questions, and watch each group engage in the activity and give positive feedback and some positive criticism.
Each participant (parent and child) will have three provided situations, and they will be requested to come up with one of their own. See the next page for the provided 3-situations for the participants. Facilitators can photocopy the handout for participants and cut into half (half going to parents, and the other to the children). The participants are given a positive and negative behaviour. The participant will act both out and the other participant has to guess both the positive and negative behaviours. Once they act out the three provided situations, then participants will each come up with one more.

End the session with a reminder of the Behaviour Bucks System and thank them for coming.
Handout Session One: Positive Scanning

*Parent Situations (Child Identifies)*

Positive Behaviour: Smile and say something nice about your child’s appearance

Negative Behaviour: Say your child did not complete a task and say they are a bad kid.

Positive Behaviour: Child got a good grade on test, so you ask to take them out for ice cream.

Negative Behaviour: Say you better be good in the ice cream store rudely.

Positive Behaviour: “Great work folding the laundry.”

Negative Behaviour: “But you never put it away” frowning.

*Child Situations (Parent Identifies)*

Positive Behaviour: You put your dishes in the dishwasher.

Negative Behaviour: But you didn’t start it.

Positive Behaviour: You made your parent a nice craft.

Negative Behaviour: But you left the mess on the kitchen table.
Positive Behaviour: You apologized to your sibling for fighting with them.

Negative Behaviour: You got into a fight with your sibling.
Positive Scanning

"Look for something positive in each person, even if somedays you have to look a little harder."

Definition:

Focusing your attention on a desirable behaviour, rather than an unwanted behaviour.

A person who is positive scanning tends to notice and reinforce positive behaviours over negative behaviours.

(Miltenberger, 2011)

Parent Examples:

One: You told your son to be by 5:30 PM to clean his room, but he came inside from playing with his friends at 6:30 PM. But you set straight up to his room to clean it.

Positive Scan: Thank you so much for being in and going right upstairs to clean your room.

Two: You told your daughter to come over and clean up her crafts. Your daughter frustrated comes over and still cleans them up.

Positive Scan: Thank you for coming over and cleaning your crafts. I really do appreciate it.

Child Examples:

One: Your mom comes home and looks a little angry because she made your favourite dinner.

Positive Scan: Hey mom, looks like you had a rough day at work, but I really appreciate you still coming home and making my favourite meal.

Two: Your dad said he would go out and play catch in an hour, but now he has been called into work. He said he would play catch tomorrow night.

Positive Scan: Hey dad! I know you didn’t know you’d be called into work tonight, but I am really excited to play catch with you tomorrow night!
Session Two: Coping Strategies

Agenda:

➢ Welcome
➢ Behaviour Bucks/Weeks Update
➢ Coping Strategies Discussion
➢ Psychoeducation
➢ Cognitive Coping Cards Activity
➢ Controlled Breathing Activity
➢ Parent-Child Activity

Materials:

➢ Writing Utensils (Pens/Pencils)
➢ Refreshments
➢ Photocopies of the Parental Activity Handout
➢ Photocopies of the Parent-Child Activity for participants
➢ Blank Paper
➢ Scissors
➢ White board with dry-erase markers
➢ Behaviour Bucks and Treasure Box

Setting:

The session will take place in a quiet comfortable St. Lawrence College classroom, with another classroom right beside it for the children’s group.

Session Description:
1. Welcome participants to session, and thank them for attending.
   a. An optional step is to offer participants refreshments
2. Start session with a weekly update, ask participants how things went this week with their child(ren), any strengths or areas with room for improvement, and behaviour bucks update, ask if they gave any out, were they surprised, annoyed, or happy with the system? Ask for their opinions on how they think their child(ren) liked the system.
3. Facilitation of the skills recap.
4. Discussion around what coping is to the parent group, and any strategies they have used both past and present, were they successful or not.
5. Hold a psychoeducation lesson about the definition of coping, and strategies that the session will focus on.
6. Parental activity surrounding the coping strategies suggested.
7. Parent-Child Activity, facilitators must use the BST method to instruct participants on activity.
8. Provide time for any questions, or concerns, remind participants about the behaviour bucks system and thank participants for coming.

**Behaviour Bucks/ Weekly Update (5-Minutes):**

Offer participants time to discuss their week. Talk to them about the techniques learned the week prior, if they tried to implement any of them with their child(ren), any successes or areas that need improvement. Facilitators should ask about the behaviour bucks system and if they rewarded their child(ren) with any, how they are feeling regarding the system, and any insight they have on how their child(ren) are feeling about the system.
Facilitators can use the examples from last week’s handout, or provide their own to test the knowledge and skill level of participants on information taught. The right side of the room will be known as the positive scanning side, the left side will negative scanning side. Facilitators will present a statement and participants must pick if it is positive scanning or not within a ten-second period. Each participant will be recorded using a Playcheck recording sheet by their assigned volunteer.

**Coping Strategies Lesson (35-Minutes):**

**Discussion (5-Minutes)**

Facilitator to start discussion, to find out what participants know about coping and different strategies they may use. Ask them what they think coping means, what strategies they use to cope with any stressful situation.

**Psychoeducation (5-Minutes)**

Cognitive Coping Card Handout (See Figure 3)

**Parental Activity (25-Minutes)**

Give parents a couple pieces of blank paper, get them to fold the paper in half and cut the pages into two, and allow them ten-minutes to create their own cognitive coping cards. Start the activity by asking them the question “What is something you do not want your child(ren) to know your feeling?”, ask the parents to write that feeling on the front of their first card and on the back, provide some ideas of how they can cope with those feelings without their child(ren) becoming worried about them. When completed, allow parents to
identify things that make them anxious, and then come up with cognitive coping cards for each.

The second half of the parental activity is related to controlled breathing. Provide parents with the Controlled Breathing Handout (See Next Page). Go through the exercise with them in preparation for the Parent-Child Activity.
Relaxed Breathing

When we are anxious or threatened our breathing speeds up in order to get our body ready for danger. Relaxed breathing (sometimes called abdominal or diaphragmatic breathing) signals the body that it is safe to relax. Relaxed breathing is slower and deeper than normal breathing, and it happens lower in the body (the belly rather than the chest).

<table>
<thead>
<tr>
<th>In-breath</th>
<th>Pause</th>
<th>Out-breath</th>
<th>Pause</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 ... 2 ... 3 ... 4</td>
<td>1 ...</td>
<td>1 ... 2 ... 3 ... 4</td>
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How to do relaxed breathing

- To practice make sure you are sitting or lying comfortably
- Close your eyes if you are comfortable doing so
- Try to breathe through your nose rather than your mouth
- Deliberately slow your breathing down. Breathe in to a count of 4, pause for a moment, then breathe out to a count of four
- Make sure that your breaths are smooth, steady, and continuous - not jerky
- Pay particular attention to your out-breath - make sure it is smooth and steady

Am I doing it right? What should I be paying attention to?

- Relaxed breathing should be low down in the abdomen (belly), and not high in the chest. You can check this by putting one hand on your stomach and one on your chest. Try to keep the top hand still, your breathing should only move the bottom hand
- Focus your attention on your breath - some people find it helpful to count in their head to begin with (“In ... two ... three ... four ... pause ... Out ... two ... three ... four ... pause ...”)

How long and how often?

- Try breathing in a relaxed way for at least a few minutes at a time – it might take a few minutes for you to notice an effect. If you are comfortable, aim for 5-10 minutes
- Try to practice regularly - perhaps three times a day

Variations and troubleshooting

- Find a slow breathing rhythm that is comfortable for you. Counting to 4 isn’t an absolute rule. Try 3 or 5. The important thing is that the breathing is slow and steady
- Some people find the sensation of relaxing to be unusual or uncomfortable at first but this normally passes with practice. Do persist and keep practising
Parent-Child Activity (45-Minutes):

The children group will join parents in the classroom to engage in the parent-child activity. The facilitators are to provide the activity using the behavioural skills training method (instruction, model, rehearsal, and feedback).

Instruction: Develop four Cognitive Coping Cards together as a team on things to deal with this week. It could be cleaning the house, or preparing dinner four out of five days this week. Provide the stressful/anxiety-provoking event on the front of the card, and coping strategies on the back.

Model: Facilitators will assume roles of parent and child and engage in the activity.

Rehearsal: Participants engage in activity.

Feedback: Facilitators and volunteers will go around the room answer any questions, and watch each group engage in the activity and give positive feedback and some positive criticism.

Each participant (parent and child) will have six coping cognitive cards to create together of things that have to be dealt with in the coming week, and brainstorm some strategies of deal with those tasks/activities.

End the session with Controlled Breathing Exercise as a group. Remind participants of Behaviour Bucks System, and thank them for coming.
**COPING**

**Quote of the day**

The struggle you’re in today, is developing the strength you need for tomorrow.

**YOU ARE OK**

**Definition**

To face and deal with responsibilities, problems, or difficulties, especially successfully, or in a calm or adequate manner.

---

**Cognitive Coping Cards**

**Going to Hockey**

What will happen?

FIRST. I will get all my equipment on.
THEN. I will find my position on the bench. Coach will help me out if I can’t tell where I should be in the line up.
NEXT. Coach will signal when it is time for me to hit the ice. I won’t go on until I see this signal.
FINALLY. When the game is over I can talk with my family about how the game went.

**How I might feel**

I may feel nervous and scared about my performance, but if I feel this way I can talk to coach, or tell myself that it is just a game and we are here to have fun and enjoy the sport of hockey. I should not try and get up and jump on the ice before it is my turn to go on.
Session Three: CBT Overview

Agenda:

➢ Welcome
➢ Behaviour Bucks/Weeks Update
➢ I-Statements Discussion
➢ CBT Psychoeducation
➢ I-Statements Activity
➢ Parent-Child Activity

Materials:

➢ Writing Utensils (Pens/Pencils)
➢ Refreshments
➢ Photocopies of the Parental Activity Handout
➢ Photocopies of the Parent-Child Activity for participants
➢ White board with dry-erase markers
➢ Behaviour Bucks and Treasure Box

Setting:

The session will take place in a quiet comfortable St. Lawrence College classroom, with another classroom right beside it for the children’s group.

Session Description:

1. Welcome participants to session, and thank them for attending.
   a. An optional step is to offer participants refreshments
2. Start session with a weekly update, ask participants how things went this week with their child(ren), any strengths or areas with room for improvement, and behaviour bucks update, ask if they gave any out.
3. Facilitation of skills recap.
4. Discussion around what I-Statements are, and what makes them helpful.
5. Hold a psychoeducation lesson about a brief introduction to CBT, and what I-Statements are, and introduce parents to the formula.
6. Parental activity using the I-Statements handout
7. Parent-Child Activity, facilitators must use the BST method to instruct participants on activity.
8. Provide time for any questions, or concerns, remind participants about the behaviour bucks system and thank participants for coming.

**Behaviour Bucks/ Weekly Update (5-Minutes):**

Offer participants time to discuss their week. Talk to them about the techniques learned the week prior, if they tried to implement any of them with their child(ren), any successes or areas that need improvement. Facilitators should ask about the behaviour bucks system and if they rewarded their child(ren) with any, how they are feeling regarding the system, and any insight they have on how their child(ren) are feeling about the system.

Facilitators can use the examples from the week’s handout, or provide their own to test the knowledge and skill level of participants on information taught. The right side of the room will be known as the positive scanning side, the left side will negative scanning side. Facilitators will present a statement and participants must pick if it is positive scanning or not within a ten-second period. Facilitators
will provide an example of controlled breathing and participants will have ten-
seconds to determine if facilitators engaged in the technique properly. Right side
of the room will be labelled as correct, and the left side of the room is labeled as
incorrect. Each participant will be recorded using a Playcheck recording sheet by
their assigned volunteer.

**CBT Lesson (35-Minutes):**

**Discussion (10-Minutes)**

Begin discussion with I-statements, ask parents what they know about I-
statements and why they may believe they are helpful to use.

**Psychoeducation (20-Minutes)**

Provide psychoeducation on simple CBT concepts using the PDF below. Offer a
background on what CBT stands for, what influences us, and how the way we
behave, feel and think are interconnected. The last few minutes come back to the
formula of the I-statements

I-statement formula: “I feel blank when you blank because blank”
Overview Of CBT
What we think, feel, and do in the present is influenced by what happened to us earlier in our lives.

Your early experiences

\[ \text{influence} \]

The development of your beliefs about:
- Your self
- The world
- Other people
- Your future

\[ \text{which affect how your perceive} \]

Situations In The Here-And-Now

Thoughts
what was going through your mind?

Emotions
what were you feeling?

Behaviors
what did you do? how did you react?

Bodily Sensations
what was going on in your body?
Parental Activity (15-Minutes)

Hand out I-statements work sheet and allow parents to read through the examples and allowing them some practice with given examples. See handout below.

Parent-Child Activity (45-Minutes)

The children group will join parents in the classroom to engage in the parent-child activity. The facilitators are to provide the activity using the behavioural skills training method (instruction, model, rehearsal, and feedback).

**Instruction:** Take the three scenarios provided and both the parent and child must come up with an appropriate I-statement. Once all three are completed, as a team come up with an example that is relevant to them, and create an I-statement for both the parent and child.

**Model:** Facilitators will assume roles of parent and child and engage in the activity.

**Rehearsal:** Participants engage in activity.

**Feedback:** Facilitators and volunteers will go around the room answer any questions, and watch each group engage in the activity and give positive feedback and some positive criticism.

Each participant (parent and child) will have eight I-statements from four different scenarios

(three given and one created).
End the session with a reminder about Behaviour Bucks System and rewarding their child for completing an I-statement during the week, and thank them for coming.
“I” Statements

Taking responsibility for your feelings will help you improve your communication when you feel upset or angry. One way to achieve this is by using “I” statements. This technique will allow you to communicate what is upsetting while minimizing blaming. If our statements feel too blaming, the person we are trying to speak to will often become defensive.

“I” Statement format: “I feel _____ when you _____ because ______.”

Examples

| Regular | “You make me angry because you are always late” |
| “I” Statement | “I feel frustrated when you come home late because I stay awake worrying.” |
| Regular | “You never call. You don’t even care.” |
| “I” Statement | “I feel hurt when you forget to call because it seems like you don’t care.” |

Practice

| Scenario | Your friend keeps cancelling plans at the last minute. Last weekend you were waiting for them at a restaurant when they called to tell you they would not be able to make it. You left feeling hurt. |
| “I” Statement | |
| Scenario | You are working on a project with a group and one member is not completing their tasks on time. You have repeatedly had to finish their work which has been very frustrating. |
| “I” Statement | |
| Scenario | A friend who borrows movies from you usually brings them back damaged. They want to borrow one again but you’re feeling worried. |
| “I” Statement | |
Hand out Session Two: Parent-Child Activity

Scenario One: Child goes first

Your parent has promised to take you to the library to pick out a new book, however when they come home they have gone right up to their room. You go to the door and knock, using an I-statement what would you say to your parent. As the parent, answer your child with your own I-statement based off their response.

Scenario Two: Parent goes first

You come home from work to find your child crying in their room, when you ask what’s wrong, your child tells you to come back in 5-minutes after being calmed down. You attend your child’s room in the 5-minutes, using an I-statement what would you say? As a child, respond to your parent’s response with an I-statement.

Scenario Three: Either can go first

Waiting in line and someone cuts right in front of you. Using an I-statement tell the person how you are feeling.
Session Four: Cognitive Distortions

Agenda:

➢ Welcome
➢ Behaviour Bucks/Weeks Update
➢ Cognitive Distortions Discussion
➢ Psychoeducation
➢ “Name that Distortion” Parental Activity
➢ Cognitive Distortions Parent-Child Activity

Materials:

➢ Writing Utensils (Pens/Pencils)
➢ Refreshments
➢ Photocopies of the Parental Activity Handout
➢ Photocopies of the Parent-Child Activity for participants
➢ White board with dry-erase markers
➢ Behaviour Bucks and Treasure Box

Setting:

The session will take place in a quiet comfortable St. Lawrence College classroom, with another classroom right beside it for the children’s group.

Session Description:

1. Welcome participants to session, and thank them for attending.
   a. An optional step is to offer participants refreshments
2. Start session with a weekly update, ask participants how things went this week with their child(ren), any strengths or difficulties they felt they had this week, and behaviour bucks update, ask if they gave any out, and if the system was holding up/still bringing results.

3. Facilitation of skills recap.

4. Facilitation of discussion surrounding cognitive distortions.

5. Provide a psychoeducation lesson.

6. Parents engage in an activity called “Name that distortion.”

7. Parents and children come together for the parent-child activity.

   Facilitators must use the BST model to provide participants with instructions.

8. Provide time for questions, and concerns. Remind participants of Behaviour bucks system and thank them for attending the session.

**Behaviour Bucks/ Weekly Update (5-Minutes):**

Offer participants time to discuss their week. Talk to them about the techniques learned the week prior, if they tried to implement any of them with their child(ren), any successes or areas that need improvement, and any complete failures they feel comfortable sharing. Facilitators should ask about the behaviour bucks system and if they rewarded their child(ren) with any, and if their children are still reinforced with the bucks.

Facilitators can use the examples from the week’s handout, or provide their own to test the knowledge and skill level of participants on information taught. The right side of the room will be known as the positive scanning side, the left side will negative scanning side. Facilitators will present a statement and participants
must pick if it is positive scanning or not within a ten-second period. Facilitators will provide an example of controlled breathing and participants will have ten-seconds to determine if facilitators engaged in the technique properly. Right side of the room will be labelled as correct, and the left side of the room is labeled as incorrect. The I-statement formula will be auditory expressed participants again will have to confirm this is correct or incorrect using the assigned sides of the room. Each participant will be recorded using a Playcheck recording sheet by their assigned volunteer.

**Cognitive Distortions Lesson (35-Minutes):**

**Discussion (10-Minutes)**

Have a group discussion about what distortions are, what makes them unhelpful, and what are better ways of thinking. Allow participants time to discuss personal examples, if they feel comfortable.

**Psychoeducation (10-Minutes)**

Provide participants with a psychoeducation handout on cognitive distortions (Figure 4).

**Parental Activity (15-Minutes)**

Facilitator must hand out the photocopied parental activity titled “Name that Distortion.” Allow participants time to work through the scenario and label them as a cognitive distortion, then in the space provided at the bottom of the participants work sheet, allow them time to reflect on which distortions they may partake in.
**Parent-Child Activity (45-Minutes)**

The children group will join parents in the classroom to engage in the parent-child activity. The facilitators are to provide the activity using the behavioural skills training method (instruction, model, rehearsal, and feedback).

*Instruction:* Take the five scenarios provided and both the parent and child take turns acting out the scenario, the other must guess the distortion and provide a challenging or more helpful thought.

*Model:* Facilitators will assume roles of parent and child and engage in the activity.

*Rehearsal:* Participants engage in activity.

*Feedback:* Facilitators and volunteers will go around the room answer any questions, and watch each group engage in the activity and give positive feedback and some positive criticism.

Each participant (parent and child) will have five scenarios (see next page) describing five common cognitive distortions, one participant must act the scenario out, and the other participant must guess the distortion, together they may come up with a more helpful, or challenging thought to better aid the individual in the scenario.
End the session with a reminder about Behaviour Bucks System and to continue rewarding their child(ren) for using the skills learned in session at home, and thank them for coming.

**Handout Session Four**

Scenario One: A son asks his father to play baseball with him in the backyard, his father declines due to work calling him in. The son concludes that his dad will never have time for him. Name that distortion and create a more helpful replacement thought.

**Distortion:**

**Replacement Thought:**

Scenario Two: A girl does poorly on her science test, she feels when she tells her mother she will call her a failure and tell her to leave the house. Name that distortion and create a more helpful thought.

**Distortion:**

**Replacement Thought:**

Scenario Three: A parent loses their temper with their child after a rough day. After the fight they think there child is going to hate them.

**Distortion:**

**Replacement Thought:**
Scenario Four: A child waits for their parent while playing basketball, their parent doesn’t show up. He thinks “they are always missing my activities.”

Distortion:

Replacement Thought:

Scenario Five: A mother gets a call that their child’s parent did not pick her up. She thinks to herself she is useless and never helps her out.

Distortion:

Replacement Thought:
Cognitive Distortions

Cognitive Distortions are ways that our brains trick us into thinking things that are untrue or twisted in ways to keep us from thinking about the situation or ourselves in a clear manner.

Our minds have the ability to trick us into unhelpful ways of thinking.

Examples

Catastrophizing

Catastrophizing is a type of thinking that means taking a situation and making it bigger than it actually is, and usually the worst case scenario. Example: “I didn’t do as well as I wanted on the test, I am a complete failure and will now fail at school.”

Black and White Thinking

Black and White Thinking is a type of thinking that means we see a person, situation or ourselves in one spectrum or the complete opposite. Never in between. Example: “My friends couldn’t hang out tonight, so they obviously hate me.”

Labelling

Labelling is the type of thinking that means taking a characteristic, usually a negative one, and applies it to the entire person. Example: “You were late today, you are always late, everywhere.”

Figure 4. Cognitive Distortions
Session Five: Dealing with Emotions

Agenda:

- Welcome
- Behaviour Bucks/Weeks Update
- Emotions Discussion
- Psychoeducation

Materials:

- Writing Utensils (Pens/Pencils)
- Refreshments
- Lined Paper
- White board with dry-erase markers
- Behaviour Bucks and Treasure Box

Setting:

The session will take place in a quiet comfortable St. Lawrence College classroom, with another classroom right beside it for the children’s group.

Session Description:

1. Welcome participants to session, and thank them for attending.
   a. An optional step is to offer participants refreshments
2. Start session with a weekly update, ask participants how things went this week with their child(ren), any strengths or difficulties they felt they had this week, and behaviour bucks update, ask if they gave any out, and if the system was holding up/still bringing results.
3. Facilitation of skills recap.
4. Facilitation of discussion about emotions and those associated with being a single parent through divorce or separation.
5. As facilitators, give some psychoeducation around the emotions, use literature to support the feelings parents are experience.
6. End the lesson with discussion of positive feelings related to being a parent using the white board.
7. Provide time for questions, and concerns. Remind participants of Behaviour bucks system and thank them for attending the session.

**Behaviour Bucks/ Weekly Update (5-Minutes):**

Offer participants time to discuss their week. Talk to them about the techniques learned the week prior, if they tried to implement any of them with their child(ren), any successes or areas that need improvement, and any complete failures they feel comfortable sharing. Facilitators should ask about the behaviour bucks system and if they rewarded their child(ren) with any, and if their children are still reinforced with the bucks.

Facilitators can use the examples from the week’s handout, or provide their own to test the knowledge and skill level of participants on information taught. The right side of the room will be known as the positive scanning side, the left side will negative scanning side. Facilitators will present a statement and participants must pick if it is positive scanning or not within a ten-second period. Facilitators will provide an example of controlled breathing and participants will have ten-seconds to determine if facilitators engaged in the technique properly. Right side of the room will be labelled as correct, and the left side of the room is labeled as
incorrect. The I-statement formula will be auditory expressed participants again will have to confirm this is correct or incorrect using the assigned sides of the room. Facilitators can offer an example of a key cognitive distortion and participants will have to identify which one it is. Each participant will be recorded using a Playcheck recording sheet by their assigned volunteer.

**Dealing with Emotions Lesson (45-Minutes):**

**Discussion (25-Minutes)**

This week is a little different than prior weeks, the session will be shorter, is open discussion surrounding emotions that the parental group may be experiencing, and there is no parent-child activity. Instead of the facilitators guiding this session, the participants will have the floor, facilitators are to practice active listening skills, and empathy during discussion. Then validate parents’ emotions with empirical support. Have an open group discussion about the emotions, let them guide the process. As parents are describing their feelings and telling their stories, have a volunteer write those emotions on one side of the white board. Hopefully by this session participants feel comfortable sharing their emotions in front of the group, however if not have them write these feelings down on a sheet of paper and as the facilitator read the emotions out loud to the group. With the session being held shorter, do not worry about timing, if discussion is going well do not stop it.

**Psychoeducation (10-Minutes)**

Provide participants with a psychoeducation lesson on what literature supports. Ultimately supporting their feelings and validating their experience.
Parental Activity (15-Minutes)

Conclude the lesson on a positive note, bring parents back to discussion about positive emotions that they experience as a result of being a parent. Encourage them to identify positive emotions that they feel about their child, about their relationship with their child, or about being a parent. Have a volunteer write the positive emotions on the other side of the white board across from the negative, continue until there are more positive than negative to illustrate the metaphor of the good outweighs the bad.

End the session with a reminder about Behaviour Bucks System and to continue rewarding their child(ren) for using the skills they have learned so far, and for instances of identifying their emotions (positive or negative), and thank them for coming and participating in a very deep topic.
Session Six: Relaxation and Mindfulness

Agenda:

- Welcome
- Behaviour Bucks/Weeks Update
- Mindfulness Discussion
- Psychoeducation on Relaxation Techniques and Mindfulness
- “How to be Mindful” Parental Activity
- Progressive Muscle Relaxation (PMR) Parent-Child Activity

Materials:

- Writing Utensils (Pens/Pencils)
- Refreshments
- Photocopies of the Parental Activity Handout
- Photocopies of the Parent-Child Activity for participants
- White board with dry-erase markers
- Behaviour Bucks and Treasure Box

Setting:

The session will take place in a quiet comfortable St. Lawrence College classroom, with another classroom right beside it for the children’s group.

Session Description:

1. Welcome participants to session, and thank them for attending.
a. An optional step is to offer participants refreshments
2. Start session with a weekly update, ask participants how things went this week with their child(ren), any strengths or difficulties they felt they had this week, and behaviour bucks update, ask if they gave any out, and if the system was holding up/still bringing results.
3. Facilitation of skills recap.
4. Facilitation of Mindfulness discussion
5. Provide a psychoeducation lesson on Mindfulness/Relaxation
6. Parents engage in an activity called “How to be Mindful.”
7. Parents and children come together for the parent-child activity.
   Facilitators must use the BST model to provide participants with instructions.
8. Provide time for questions, and concerns. Remind participants of Behaviour bucks system and thank them for attending the session.

**Behaviour Bucks/ Weekly Update (5-Minutes):**

Offer participants time to discuss their week. Talk to them about the techniques learned the week prior, if they tried to implement any of them with their child(ren), any successes or areas that need improvement, and any complete failures they feel comfortable sharing. Facilitators should ask about the behaviour bucks system and if they rewarded their child(ren) with any, and if their children are still reinforced with the bucks.

Facilitators can use the examples from the week’s handout, or provide their own to test the knowledge and skill level of participants on information taught. The right side of the room will be known as the positive scanning side, the left side
will negative scanning side. Facilitators will present a statement and participants must pick if it is positive scanning or not within a ten-second period. Facilitators will provide an example of controlled breathing and participants will have ten-seconds to determine if facilitators engaged in the technique properly. Right side of the room will be labelled as correct, and the left side of the room is labeled as incorrect. The I-statement formula will be auditory expressed participants again will have to confirm this is correct or incorrect using the assigned sides of the room. Facilitators can offer an example of a key cognitive distortion and participants will have to identify which one it is. Each participant will be recorded using a Playcheck recording sheet by their assigned volunteer.

**Relaxation/Mindfulness Lesson (35-Minutes):**

**Discussion (10-Minutes)**

Discuss with participants about what mindfulness is to them, how they “relax” and why being mindful is important. Get an understanding of relaxation techniques participants use, and what kind of knowledge do they have about mindfulness.

**Psychoeducation (10-Minutes)**

Provide participants in what mindfulness is, what relaxation is, and why both of beneficial for an individual. Introduce them to mindful versus mind-full.

**Mindfulness:** Being fully aware of the present moment, while acknowledging and accepting all that comes with the present moment.

**Relaxation:** The state of being free from tension and any uncomfortable sensation.
Parental Activity (15-Minutes)

Facilitator must hand out the photocopied parental activity to do with mindfulness (Figure 5). Allow participants time to work through a list of ways they can be mindful at home, school or work, and try to identify with a few, and add others that may not be on the list.

Parent-Child Activity (45-Minutes)

The children group will join parents in the classroom to engage in the parent-child activity. The facilitators are to provide the activity using the behavioural skills training method (instruction, model, rehearsal, and feedback).

Instruction: Take a seat and get into a comfortable position. We are going to go through a progressive muscle relaxation activity.

Model: Facilitators will assume roles of participant and facilitator and engage in the activity.

Rehearsal: Participants engage in activity. Facilitators will run through the PMR exercise as directed on the next page.

Feedback: After the activity, facilitators will give out feedback.

Each participant (parent and child) will listen to the facilitator giving out the instructions for PMR verbally. Facilitators and volunteers will also engage in the activity, but will be available to answer any questions and there will be an opportunity for the participants to have a discussion about how the exercise felt and how they felt about it. Facilitators will give out feedback.
End the session with a reminder about Behaviour Bucks System and to continue rewarding their child(ren) for using the skills learned in session at home, and thank them for coming.
**Progressive Muscle Relaxation**

Our bodies respond automatically to stressful situations and thoughts by becoming tense. The opposite relationship also works: a good way of relaxing the mind is to deliberately relax the body.

In a progressive muscle relaxation each muscle group is tensed in turn, and the tension is then released. This relaxes the muscles and allows you to notice the contrast between tension and relaxation.

Relaxation should be enjoyable so if any part of the exercise is too difficult skip it for the moment. If you have any injuries you may wish to leave out that part of the exercise.

**Preparation**

Lie down flat on your back, on a firm bed, a couch, or on the floor. Support your head and neck with a pillow or cushion. Alternatively sit in a comfortable chair with your head well-supported. Close your eyes if you are comfortable doing so.

**Instructions**

Focus your attention on different parts of your body in sequence. Go through the sequence three times:

1) **Tense & release**: Tense that body part, hold it for a few moments, then relax

2) **Lightly tense & release**: Tense that body part with just enough tension to notice, then relax

3) **Release only**: Just pay attention to each muscle group and decide to relax it

**Recommended sequence**

1. Right hand & arm  
   (clench the fist & tighten the muscles in the arm)
2. Left hand & arm
3. Right leg  
   (tense the leg, lifting the knee slightly)
4. Left leg
5. Stomach & chest
6. Back muscles  
   (pull the shoulders back slightly)
7. Neck & throat  
   (push the head back slightly into the pillow/surface)
8. Face  
   (scrunch up the muscles in your face)
Figure 5. Mindfulness
Session Seven: Premack Principle

Agenda:

➢ Welcome
➢ Behaviour Bucks/Weeks Update
➢ Premack Discussion
➢ Psychoeducation on Premack Principle
➢ T-Chart Parental Activity
➢ Premack Principle Parent-Child Activity

Materials:

➢ Writing Utensils (Pens/Pencils)
➢ Refreshments
➢ Photocopies of the Parental Activity Handout
➢ Photocopies of the Parent-Child Activity for participants
➢ White board with dry-erase markers
➢ Behaviour Bucks and Treasure Box

Setting:

The session will take place in a quiet comfortable St. Lawrence College classroom, with another classroom right beside it for the children’s group.

Session Description:

1. Welcome participants to session, and thank them for attending.
   a. An optional step is to offer participants refreshments
2. Start session with a weekly update, ask participants how things went this week with their child(ren), any strengths or difficulties they felt they had this week, and behaviour bucks update, ask if they gave any out, and if the system was holding up/still bringing results.

3. Facilitation of skills recap.

4. Facilitation of Premack Principle discussion

5. Provide a psychoeducation lesson on Premack Principle

6. Parents engage in an t-chart activity

7. Parents and children come together for the parent-child activity.
   Facilitators must use the BST model to provide participants with instructions.

8. Provide time for questions, and concerns. Remind participants of Behaviour bucks system and thank them for attending the session.

**Behaviour Bucks/ Weekly Update (5-Minutes):**

Offer participants time to discuss their week. Talk to them about the techniques learned the week prior, if they tried to implement any of them with their child(ren), any successes or areas that need improvement, and any complete failures they feel comfortable sharing. Facilitators should ask about the behaviour bucks system and if they rewarded their child(ren) with any, and if their children are still reinforced with the bucks.

Facilitators can use the examples from the week’s handout, or provide their own to test the knowledge and skill level of participants on information taught. The right side of the room will be known as the positive scanning side, the left side will negative scanning side. Facilitators will present a statement and participants
must pick if it is positive scanning or not within a ten-second period. Facilitators will provide an example of controlled breathing and participants will have ten-seconds to determine if facilitators engaged in the technique properly. Right side of the room will be labelled as correct, and the left side of the room is labeled as incorrect. The I-statement formula will be auditory expressed participants again will have to confirm this is correct or incorrect using the assigned sides of the room. Facilitators can offer an example of a key cognitive distortion and participants will have to identify which one it is. Facilitators can offer a true or false about the PMR exercise, example “true or false, PMR should start in the middle of your body like the stomach area” participants will be able to determine if it is true or false and go to the representing side of the room. Each participant will be recorded using a Playcheck recording sheet by their assigned volunteer.

**Premack Principle Lesson (45-Minutes):**

**Discussion (10-Minutes)**

Discuss with parents’ ways in which they attempt or get their children to do things that are not enjoyed. In other words, what techniques do they use to get their child to engage in low probability behaviours. Ask parents about premack principle, and what they know about it.

**Psychoeducation (15-Minutes)**

Provide participants with a lesson handout on premack principle (Figure 6).

**Parental Activity (20-Minutes)**

Give participants a photocopy of the T-Chart below. Allow them to come up with high (+) and low (-) probability behaviours that their child(ren) may engage in.
This T-Chart will be used during the parent-child activity. After that list is complete, have the parents make the exact same t-chart but choose behaviours that they engage in.

T-Chart

<table>
<thead>
<tr>
<th>High-Probability Behaviours (+)</th>
<th>Low-Probability Behaviours (-)</th>
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</table>
Parent-Child Activity (45-Minutes)

The children group will join parents in the classroom to engage in the parent-child activity. The facilitators are to provide the activity using the behavioural skills training method (instruction, model, rehearsal, and feedback).

Instruction: Take your t-chart that you filled out for your child(ren) behaviours, and try and role-play and get your child(ren) to engage in the low-probability behaviours. Once that is complete, the child(ren) will take the other t-chart that has the parents behaviours on it, and role-play to get the parent to engage in the low-probability behaviours.

Model: Facilitators will assume roles of participant and facilitator and engage in the activity.

Rehearsal: Participants engage in activity.

Feedback: Facilitators and volunteers will walk around and watch participants engage in the activity and provide them with positive feedback and criticism.

Each participant (parent and child) will role-play using the premack principle. Each parent will role-pay with their child and try and get them to engage in the low-probability behaviours, and then the children will have a chance to get their parents to engage in the their low-probability behaviours.
End the session with a reminder about Behaviour Bucks System and to continue rewarding their child(ren) for using the skills learned in session at home, and thank them for coming.
Figure 6. Premack Principle

PREMACK PRINCIPLE

Quote of the day
Do the hard thing first

Definition
If one behaviour has a higher probability than another, the engagement in the higher probable behaviour should be made contingent on engaging in the less likely behaviour first.

Examples
Completing your homework first then going outside to play

Clean the house then go out to bowling with your friends
Session Eight: Forgiveness and Moving On

Agenda:

➢ Welcome
➢ Behaviour Bucks/Weeks Update
➢ Forgiveness and Moving on Discussion
➢ Kitsugi Parent-Child Activity

Materials:

➢ Writing Utensils (Pens/Pencils)
➢ Refreshments
➢ Materials for Kitsugi: glass bowls (one for each dyad) an enclosed bag that will fit one bowl, metal spoon, melted yellow crayons, and hair dryer, transparent glue, popsicle sticks, and small paint brushes.
➢ White board with dry-erase markers
➢ Behaviour Bucks and Treasure Box

Setting:

The session will take place in a quiet comfortable St. Lawrence College classroom, with another classroom right beside it for the children’s group.

Session Description:

1. Welcome participants to session, and thank them for attending.
   1. An optional step is to offer participants refreshments
2. Start session with a weekly update, ask participants how things went this week with their child(ren), any strengths or difficulties they felt they had this week, and behaviour bucks update, ask if they gave any out, and if the system was holding up/still bringing results.

3. Facilitation on skills recap.

4. Facilitation of a discussion surrounding moving on and forgiveness.

5. Provide instructions and background on Kitsugi activity.


7. Provide time for questions, and concerns. Remind participants of Behaviour bucks system and thank them for attending the session.

**Behaviour Bucks/ Weekly Update (5-Minutes):**

Offer participants time to discuss their week. Talk to them about the techniques learned the week prior, if they tried to implement any of them with their child(ren), any successes or areas that need improvement, and any complete failures they feel comfortable sharing. Facilitators should ask about the behaviour bucks system and if they rewarded their child(ren) with any, and if their children are still reinforced with the bucks.

If not done so, mix up the order of the questions to further test the ability of participants. Facilitators can use the examples from the week’s handout, or provide their own to test the knowledge and skill level of participants on information taught. The right side of the room will be known as the positive scanning side, the left side will negative scanning side. Facilitators will present a statement and participants must pick if it is positive scanning or not within a ten-second period. Facilitators will provide an example of controlled breathing and
participants will have ten-seconds to determine if facilitators engaged in the technique properly. Right side of the room will be labelled as correct, and the left side of the room is labeled as incorrect. The I-statement formula will be auditory expressed participants again will have to confirm this is correct or incorrect using the assigned sides of the room. Facilitators can offer an example of a key cognitive distortion and participants will have to identify which one it is. Facilitators can offer a true or false about the PMR exercise, example “true or false, PMR should start in the middle of your body like the stomach area” participants will be able to determine if it is true or false and go to the representing side of the room. Give a poor example of premack principle, such as a parent physically making the child doing a low-probability behaviour and ask participants to identify whether or not the example was premack principle. Each participant will be recorded using a Playcheck recording sheet by their assigned volunteer.

**Forgiveness Lesson(90-Minutes):**

Forgiveness and Moving on Discussion (15-Minutes)

This discussion is a little different from all the other weekly discussions. Allow participants to take control of the conversation, and lead the session.

Kitsugi Activity (75-Minutes)

Materials needed will be provided for participants.

Instructions:

1. Have participants pick a bowl and bag.
2. Give them the opportunity to use a spoon to break the bowl.
3. Using a hairdryer melt down the yellow crayons, and mix in transparent glue

4. Using the yellow crayons and glue to represent the gold and the small paint brush, put and glue back together the bowl.

Provide participants with this video to demonstrate how to do this before allowing them to get messy and take to the activity with their children.

https://www.youtube.com/watch?v=NqBI7RcsKAa
Session Nine: Problem-Solving

Agenda:

➢ Welcome
➢ Behaviour Bucks/Weeks Update
➢ Problem-Solving Discussion
➢ Psychoeducation on Problem-Solving techniques
➢ Parental Activity
➢ Parent-Child Activity

Materials:

➢ Writing Utensils (Pens/Pencils)
➢ Refreshments
➢ Two Photocopies of the Parental Activity Handout
➢ White board with dry-erase markers
➢ Behaviour Bucks and Treasure Box

Setting:

The session will take place in a quiet comfortable St. Lawrence College classroom, with another classroom right beside it for the children’s group.

Session Description:

1. Welcome participants to session, and thank them for attending.
   a. An optional step is to offer participants refreshments
2. Start session with a weekly update, ask participants how things went this week with their child(ren), any strengths or difficulties they felt they had
this week, and behaviour bucks update, ask if they gave any out, and if the system was holding up/still bringing results.

3. Facilitation of skills recap.

4. Facilitation of Problem-Solving discussion

5. Provide a psychoeducation lesson

6. Parents engage in an activity

7. Parents and children come together for the parent-child activity. Facilitators must use the BST model to provide participants with instructions.

8. Provide time for questions, and concerns. Remind participants of Behaviour bucks system and thank them for attending the session.

**Behaviour Bucks/ Weekly Update (5-Minutes):**

Offer participants time to discuss their week. Talk to them about the techniques learned the week prior, if they tried to implement any of them with their child(ren), any successes or areas that need improvement, and any complete failures they feel comfortable sharing. Facilitators should ask about the behaviour bucks system and if they rewarded their child(ren) with any, and if their children are still reinforced with the bucks.

Facilitators can use the examples from the week’s handout, or provide their own to test the knowledge and skill level of participants on information taught. The right side of the room will be known as the positive scanning side, the left side will negative scanning side. Facilitators will present a statement and participants must pick if it is positive scanning or not within a ten-second period. Facilitators will provide an example of controlled breathing and participants will have ten-
seconds to determine if facilitators engaged in the technique properly. Right side of the room will be labelled as correct, and the left side of the room is labeled as incorrect. The I-statement formula will be auditory expressed participants again will have to confirm this is correct or incorrect using the assigned sides of the room. Facilitators can offer an example of a key cognitive distortion and participants will have to identify which one it is. Facilitators can offer a true or false about the PMR exercise, example “true or false, PMR should start in the middle of your body like the stomach area” participants will be able to determine if it is true or false and go to the representing side of the room. Give a poor example of premack principle, such as a parent physically making the child doing a low-probability behaviour and ask participants to identify whether or not the example was premack principle. Each participant will be recorded using a Playcheck recording sheet by their assigned volunteer.

**Problem-Solving Lesson (35-Minutes):**

**Discussion (10-Minutes)**

Discuss with participants how they currently problem-solve, and what they believe problem-solving is.

**Psychoeducation (10-Minutes)**

Introduce problem-solving through the use of a thought record.

**Parental Activity:**

Pick a current problem, and use the thought record to work through it.
<table>
<thead>
<tr>
<th>Situation</th>
<th>Emotion or feeling</th>
<th>Negative automatic thought</th>
<th>Evidence that supports the thought</th>
<th>Evidence that does not support the thought</th>
<th>Alternative thought</th>
<th>Emotion or feeling</th>
</tr>
</thead>
<tbody>
<tr>
<td>Describe what was happening: Who, what, when, where?</td>
<td>Emotions can be described with one word: e.g. angry, sad, scared Rate 0-100%</td>
<td>Identify one thought to work on: What thoughts were going through your mind? What memories or images were in my mind?</td>
<td>What facts support the truthfulness of this thought or image?</td>
<td>What experiences indicate that this thought is not completely true all of the time? If my best friend had this thought what would I tell them? Are there any small experiences which contradict this thought?</td>
<td>Write a new thought which takes into account the evidence for and against the original thought</td>
<td>How do you feel about the situation now? Rate 0 - 100%</td>
</tr>
</tbody>
</table>
Parent-Child Activity:

The children group will join parents in the classroom to engage in the parent-child activity. The facilitators are to provide the activity using the behavioural skills training method (instruction, model, rehearsal, and feedback).

*Instruction:* Provide a situation related to divorce for parents and children to work together on the thought record.

*Model:* Facilitators will assume roles of participant and facilitator and engage in the activity.

*Rehearsal:* Participants engage in activity.

*Feedback:* After the activity, facilitators will give out feedback.

Each participant (parent and child) will listen to the facilitator giving out the instructions for the thought record, and to the situation being provided. Facilitators and volunteers will walk around and provide positive and criticism for participants.

End the session with a reminder about Behaviour Bucks System and to continue rewarding their child(ren) for using the skills learned in session at home, and thank them for coming.
Session Ten: Termination, Evaluation & Assessments

Agenda:

- Welcome
- Behaviour Bucks/Weeks Update
- Program Discussion, Questions, Concerns, etc
- Assessments
- Parent-Child Balloon Activity

Materials:

- Writing Utensils (Pens/Pencils)
- Refreshments
- Balloons with strings for every participant
- White board with dry-erase markers
- Behaviour Bucks and Treasure Box

Setting:

The session will take place in a quiet comfortable St. Lawrence College classroom, with another classroom right beside it for the children’s group.

Session Description:

1. Welcome participants to session, and thank them for attending.
   a. An optional step is to offer participants refreshments
2. Start session with the weekly update, ask participants how things went this week with their child(ren), any strengths or difficulties they felt they had this week, and behaviour bucks update, ask if they gave any out, and if the system was holding up/still bringing results.

3. Facilitation of recap of skills learned

4. Provide a period of time devoted to program discussion surrounding strengths, limitations, etc. Also allow for any questions or concerns to be put forth.

5. Assessment package is filled out.

6. Parents and children come together for the parent-child activity. Each individual will be allowed to blow up their own balloon, tie a string around it, and let it go along with all stress, emotions, and trying times that come with being part of a divorced family.

7. Provide time to thank your participants and celebrate the accomplishments each participant has made.

**Behaviour Bucks/ Weekly Update (5-Minutes):**

Offer participants time to discuss their week. Talk to them about the techniques learned the week prior, if they tried to implement any of them with their child(ren), any successes or areas that need improvement, and any complete failures they feel comfortable sharing. Facilitators should ask about the behaviour bucks system and if they rewarded their child(ren) with any, and if their children are still reinforced with the bucks.

Facilitators can use the examples from the week’s handout, or provide their own to test the knowledge and skill level of participants on information taught. The
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_Congratulations on facilitating the Restructuring After Divorce program!_