

**PracticePlanners®**

Arthur E. Jongsma, Jr., Series Editor

# The Child Psychotherapy Progress Notes Planner Second Edition

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*Arthur E. Jongsma, Jr.*

*L. Mark Peterson*

*William P. McInnis*

*David J. Berghuis*



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# The Child Psychotherapy Progress Notes Planner

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***Library of Congress Cataloging-in-Publication Data:***

The child psychotherapy progress notes planner / Arthur E. Jongsma, Jr. . . . [et al.].—2nd ed.  
p. cm. — (Practice planner series)

First ed. published in 2001, entered under: Jongsma, Arthur E., 1943–  
ISBN 0-471-45980-1 (pbk.)

1. Child psychotherapy I. Jongsma, Arthur E., 1943– II. Jongsma, Arthur E., 1943–  
Child psychotherapy progress notes planner. III. Practice series.

RJ504.J66 2003  
618.92'8914—dc21

2003049668

Printed in the United States of America.

10 9 8 7 6 5 4 3 2 1

To my good friend, Ronn Koehler. Thanks for your friendship and support through the years.

—*David J. Berghuis*

To Bob and Ruth Knoll, who have been good friends longer than we all care to remember.

—*Arthur E. Jongsma, Jr.*

To Lynn and our three children, Breanne, Kelsey, and Andrew, who bring so much joy and meaning to my life.

—*William P. McInnis*

To Harold Kunze, in gratitude for forty years of close friendship.

—*L. Mark Peterson*





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# PRACTICEPLANNERS® SERIES PREFACE

The practice of psychotherapy has a dimension that did not exist 30, 20, or even 15 years ago—accountability. Treatment programs, public agencies, clinics, and even group and solo practitioners must now justify the treatment of patients to outside review entities that control the payment of fees. This development has resulted in an explosion of paperwork. Clinicians must now document what has been done in treatment, what is planned for the future, and what the anticipated outcomes of the interventions are. The books and software in this *PracticePlanners* series are designed to help practitioners fulfill these documentation requirements efficiently and professionally.

The *PracticePlanners* series is growing rapidly. It now includes not only the original *Complete Adult Psychotherapy Treatment Planner*, Third Edition, *The Child Psychotherapy Treatment Planner*, Third Edition, and *The Adolescent Psychotherapy Treatment Planner*, Third Edition, but also Treatment Planners targeted to specialty areas of practice, including: addictions, juvenile justice/residential care, couples therapy, employee assistance, behavioral medicine, therapy with older adults, pastoral counseling, family therapy, group therapy, neuropsychology, therapy with gays and lesbians, special education, school counseling, probation and parole, therapy with sexual abuse victims and offenders, and more.

Several of the Treatment Planner books now have companion Progress Notes Planners (e.g. Adult, Adolescent, Child, Addictions, Severe and Persistent Mental Illness, Couples). More of these planners that provide a menu of progress statements that elaborate on the client's symptom presentation and the provider's therapeutic intervention are in production. Each Progress Notes Planner statement is directly integrated with "Behavioral Definitions" and "Therapeutic Interventions" items from the companion Treatment Planner.

The list of therapeutic Homework Planners is also growing from the original Brief Therapy Homework for adults to Adolescent, Child, Couples, Group, Family, Addictions, Divorce Grief, Employee Assistance, and School Counseling/School Social Work Homework Planners. Each of these books can be used alone or in conjunction with their companion Treatment Planner. Homework assignments are designed around each presenting problem (e.g. Anxiety, Depression, Chemical Dependence, Anger Management, Panic, Eating Disorders) that is the focus of a chapter in its corresponding Treatment Planner.

Client Education Handout Planners, a new branch in the series, provides brochures and handouts to help educate and inform adult, child, adolescent, couples, and family clients on a myriad of mental health issues, as well as life skills techniques. The list of presenting problems for which information is provided mirrors the list of presenting problems in the Treatment Planner of the title similar to that of the Handout Planner. Thus, the problems for which educational material is provided in the *Child and Adolescent Client Education Handout Planner* reflect the presenting problems listed in *The Child* and *The Adolescent Psychotherapy Treatment Planner* books. Handouts are included on CD-ROMs for easy printing and are ideal for use in waiting rooms, at presentations, as newsletters, or as information for clients struggling with mental illness issues.

In addition, the series also includes *TheraScribe*®, the latest version of the popular treatment planning, clinical record-keeping software. *TheraScribe* allows the user to import the data from any of the Treatment Planner, Progress Notes Planner, or Homework Planner books into the software's expandable database. Then the point-and-click method can create a detailed, neatly organized, individualized, and customized treatment plan along with optional integrated progress notes and homework assignments.

Adjunctive books, such as *The Psychotherapy Documentation Primer*, and *Clinical, Forensic, Child, Couples and Family, Continuum of Care*, and *Chemical Dependence Documentation Sourcebook* contain

## xiv SERIES PREFACE

forms and resources to aid the mental health practice management. The goal of the series is to provide practitioners with the resources they need in order to provide high-quality care in the era of accountability—or, to put it simply, we seek to help you spend more time on patients, and less time on paperwork.

ARTHUR E. JONGSMA, JR.  
*Grand Rapids, Michigan*

# ACKNOWLEDGMENTS

The original authors are deeply indebted to David J. Berghuis who managed the update of this second edition of the *Child Progress Notes Planner*. He is responsible for adding the new material for the Parenting, Bullying/Intimidation, Perpetrator, and Lying/Manipulative chapters. He also fine-tuned the other chapters to make them coordinate exactly with the new third edition of the *Child Psychotherapy Treatment Planner*. Thank you, Dave, for your fine work.

A.E.J.



# INTRODUCTION

## INTERFACE WITH TREATMENT PLANNER

Progress notes are not only the primary source for documenting the therapeutic process, but also one of the main factors in determining the client's eligibility for reimbursable treatment. Although the books can be used independently, *The Child Psychotherapy Progress Notes Planner*, Second Edition, provides prewritten sentences that are directly coordinated with the symptom descriptions in the Behavioral Definition section and with the Therapeutic Intervention section of *The Child Psychotherapy Treatment Planner*, Third Edition (John Wiley & Sons, 2002). (It is important to note that this second edition of *The Child Progress Notes Planner* is a direct companion book to the third edition of *The Child Psychotherapy Treatment Planner*. The first edition of *The Child Progress Notes Planner* was a direct companion to the second edition of *The Child Psychotherapy Treatment Planner*. As the Treatment Planner books are revised and new material is added, the companion Progress Notes book is revised.) Used together, you'll find these books to be both a time saver and a guidepost to complete clinical record keeping.

## ORGANIZATION OF PROGRESS NOTES PLANNER

Each chapter title is a reflection of the client's potential presenting problem. The first section of the chapter provides a detailed menu of statements that may describe how that presenting problem has manifested itself in behavioral signs and symptoms. The numbers in parentheses within the Client Presentation section correspond to the number of the Behavioral Definition from the Treatment Planner. For example, consider the following three items from the "Academic Underachievement" chapter:

### **12. Excessive Parental Pressure (9)**

- A. The client has viewed his/her parents as placing excessive or unrealistic pressure on him/her to achieve academic success.
- B. The parents acknowledged that they have placed excessive or unrealistic pressure on the client to achieve academic success.
- C. The parents denied placing excessive or unrealistic pressure on the client to achieve; instead, they attributed the client's lowered academic performance to his/her lack of motivation and effort.
- D. The client reported that his/her parents have decreased the amount of pressure they placed on him/her to achieve academic success.
- E. The parents have established realistic expectations of the client's level of capabilities.

### **13. Excessive Criticism (9)**

- A. The client described the parents as being overly critical of his/her academic performance.
- B. The client expressed feelings of sadness and inadequacy about critical remarks that his/her parents have made in regard to his/her academic performance.
- C. The client acknowledged that he/she deliberately refuses to do school assignments when he/she perceives the parents as being overly critical.
- D. The parents acknowledged that they have been overly critical of the client's academic performance.
- E. The parents have significantly reduced the frequency of their critical remarks about the client's academic performance.

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### 14. Lack of Motivation (9)

- A. The client verbalized little motivation to improve his/her academic performance.
- B. The client has often complained of being bored with or disinterested in his/her schoolwork.
- C. The client verbally acknowledged that his/her academic performance will not improve unless he/she shows more interest and puts forth greater effort.
- D. The client has shown more interest in his/her schoolwork and put forth greater effort.
- E. The client's renewed interest and motivation have contributed to improved academic performance.

In the preceding example, the numeral 9 in parentheses refers to the related Behavioral Definition from the "Academic Underachievement" chapter in *The Child Psychotherapy Treatment Planner*, which states, "Excessive or unrealistic pressure placed on the client by his/her parents to the degree that it negatively affects his/her academic performance."

The second section of each chapter provides a menu of statements related to the action that was taken within the session to assist the client in making progress. The numbering of the items in the Interventions Implemented section follows exactly the numbering of Therapeutic Intervention items in the corresponding Treatment Planner. For example, consider the following item from the "Academic Underachievement" chapter:

### 19. Encourage Positive Reinforcement (19)

- A. The parents and teachers were encouraged to provide frequent positive reinforcement to maintain the client's interest and motivation in completing his/her school/homework assignments.
- B. The parents and teachers were challenged to look for opportunities to praise the client for being responsible or successful at school, instead of focusing on times when the client failed to behave responsibly or achieve success.
- C. Today's session explored the contributing factors or underlying dynamics that prevent the parents from offering praise and positive reinforcement on a consistent basis.

In the preceding example, the item number 19 corresponds directly to the same numbered item in the Therapeutic Interventions section from the "Academic Underachievement" chapter of *The Child Psychotherapy Treatment Planner*, which states, "Encourage the parents and teachers to give frequent praise and positive reinforcement for the client's effort and accomplishment on academic tasks." Within the Client Presentation and Interventions Implemented sections of each chapter, the statements are arranged to reflect a progression toward resolution of the problem. These are included to be used in later stages of therapy as the client moves forward toward discharge.

Finally, all item lists begin with a few keywords. These words are meant to convey the theme or content of the sentences in that listing. The clinician may peruse the list of keywords to find content that matches the client's presentation and the clinician's intervention.

## USING THE CHILD PROGRESS NOTES PLANNER

If the user has not used *The Child Psychotherapy Treatment Planner* to initiate treatment, the relevant progress notes can be found by locating the chapter title that reflects the client's presenting problem, scanning the keywords to find the theme that fits the session, and then selecting the sentences that describe first how the client presented for that session and then which interventions were used to assist the client in reaching his/her therapeutic goals and objectives. It is expected that the clinician will modify the prewritten statements contained in this book to fit the exact circumstances of the client's presentation and treatment. Individualization of treatment must be reflected in progress notes that are tailored to the unique client's presentation, strengths, and weaknesses.



In order to maintain complete client records, the following must be entered in the patient's records: progress note statements that may be selected from this book; the date, time, and length of a session; those present during the session; the provider; provider's credentials; and a signature.

All progress notes must be tied to the treatment plan—session notes should elaborate on the problems, symptoms, and interventions contained in the plan. If a session focuses on a topic outside those covered in the treatment plan, providers must update the treatment plan accordingly.

## **PROGRESS NOTES AND THE HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT (HIPAA)**

As of April 2003, new federal regulations under the Health Insurance Portability and Accountability Act (HIPAA) govern the privacy or confidentiality of a client's "psychotherapy notes" (or process notes or progress notes) as well as other protected health information (PHI). If you keep detailed notes for each session that reveal personal information about the client, you may separate these psychotherapy notes from the rest of the client's file that contains PHI. PHI and psychotherapy notes must be kept secure in a locked file and access to it must be limited and protected by office policy and procedures. Psychotherapy notes require additional protection in that the client must sign a specific authorization to release this confidential information to anyone beyond the client's therapist or treatment team. For most of us, this regulation does not impose a new standard of practice since we have been protecting psychotherapy notes as confidential and requiring a release before sharing them. A new wrinkle that does result from HIPAA is that a client's psychotherapy notes are not available to insurance carriers or managed care organizations. Decisions about coverage for mental health services may not hinge on psychotherapy note information and the client may not be denied coverage based on the lack of access to this confidential information.

Does the information contained in this book, when entered into a client's record as a progress note, qualify as a "psychotherapy note" and therefore merit confidential protection under HIPAA regulations? The answer to that question is, "It depends." If the progress note that is created by selecting sentences from the database contained in this book is kept in a location separate from the client's PHI data, then the note could qualify as psychotherapy note data that is more protected than general PHI. However, because the sentences contained in this book convey generic information regarding the client's progress, the clinician may decide to keep the notes mixed in with the client's PHI, and not consider it psychotherapy note data. In short, how you treat the information (separate from or integrated with PHI) can determine if this progress note planner data is psychotherapy note information. If you modify or edit these generic sentences to reflect more personal information about the client or you add sentences that contain confidential information, the argument for keeping these notes separate from PHI and treating them as psychotherapy notes becomes stronger. For some therapists, our sentences alone reflect enough personal information to qualify as psychotherapy notes and they will keep these notes separate from the client's PHI and require specific authorization from the client to share them with a clearly identified recipient for a clearly identified purpose.

# ACADEMIC UNDERACHIEVEMENT

## CLIENT PRESENTATION

### 1. Academic Underachievement (1)\*

- A. The client's teachers and parents reported a history of academic performance that is below the expected level, given the client's measured intelligence or performance on standardized achievement tests.
- B. The client verbally admitted that his/her current academic performance is below the expected level of functioning.
- C. The client has started to assume more responsibility for completing his/her school and homework assignments.
- D. The client has taken active steps (e.g., studying at routine times, seeking outside tutor, consulting with teacher before or after class) to improve his/her academic performance.
- E. The client's academic performance has improved to his/her level of capability.

### 2. Incomplete Homework Assignments (2)

- A. The client has consistently failed to complete his/her classroom or homework assignments in a timely manner.
- B. The client has refused to comply with parents' and teachers' requests to complete classroom or homework assignments.
- C. The client expressed a renewed desire to complete his/her classroom and homework assignments on a regular basis.
- D. The client has recently completed his/her classroom and homework assignments on a consistent basis.
- E. The client's regular completion of classroom and homework assignments has resulted in higher grades.

### 3. Disorganization (3)

- A. The parents and teachers described a history of the client being disorganized in the classroom.
- B. The client has often lost or misplaced books, school papers, or important things necessary for tasks or activities at school.
- C. The client has started to take steps (e.g., using planner or agenda to record school/homework assignments, consulting with teachers before or after school, scheduling routine study times) to become more organized at school.
- D. The client's increased organizational abilities have contributed to his/her improved academic performance.

### 4. Poor Study Skills (3)

- A. Parents and teachers reported that the client has historically displayed poor study skills.
- B. The client acknowledged that his/her lowered academic performance is primarily due to his/her lack of studying.
- C. The client has recently spent little time studying.
- D. The client reported a recent increase in study time.

\*The numbers in parentheses correlate to the number of the Behavioral Definition statement in the companion chapter with same title in *The Child Psychotherapy Treatment Planner*, Third Edition (Jongsma, Peterson, and McInnis) by John Wiley & Sons, 2003.

- E. The client's increased study time has been a significant contributing factor to his/her improved academic performance.

**5. Procrastination (4)**

- A. The client has repeatedly procrastinated or postponed doing his/her classroom or homework assignments in favor of engaging in social, leisure, or recreational activities.
- B. The client has continued to procrastinate doing his/her classroom or homework assignments.
- C. The client has agreed to postpone social, leisure, or recreational activities until completing his/her homework assignments.
- D. The client has demonstrated greater self-discipline by completing homework assignments before engaging in social, leisure, or recreational activities.
- E. The client has achieved and maintained a healthy balance between accomplishing academic goals and meeting his/her social and emotional needs.

**6. Family History of Academic Problems (5)**

- A. The client and parents described a family history of academic problems and failures.
- B. The client's parents have demonstrated little interest or involvement in the client's schoolwork or activities.
- C. The client expressed a desire for his/her parents to show greater interest or involvement in his/her schoolwork or activities.
- D. The parents verbalized a willingness to show greater interest in and to become more involved in the client's schoolwork or activities.
- E. The parents have sustained an active interest and involvement in the client's schoolwork and have implemented several effective interventions to help the client achieve his/her academic goals.

**7. Depression (6)**

- A. The client's feelings of depression, as manifested by his/her apathy, listlessness, and lack of motivation have contributed to and resulted from his/her lowered academic performance.
- B. The client appeared visibly depressed when discussing his/her lowered academic performance.
- C. The client expressed feelings of happiness about his/her improved academic performance.
- D. The client's academic performance has improved since his/her depression has lifted.

**8. Low Self-Esteem (6)**

- A. The client's low self-esteem, feelings of insecurity, and lack of confidence have contributed to and resulted from his/her lowered academic performance.
- B. The client displayed a lack of confidence and expressed strong self-doubts about being able to improve his/her academic performance.
- C. The client verbally acknowledged a tendency to give up easily and withdraw in the classroom when feeling insecure and unsure of himself/herself.
- D. The client verbalized positive self-descriptive statements about his/her academic performance.
- E. The client has consistently expressed confidence in his/her ability to achieve academic goals.

**9. Disruptive/Attention-Seeking Behavior (7)**

- A. The client has frequently disrupted the classroom with his/her negative attention-seeking behavior instead of focusing on schoolwork.
- B. The parents have received reports from teachers that the client has continued to disrupt the classroom with negative attention-seeking behavior.
- C. The client acknowledged that he/she tends to engage in disruptive behavior when he/she begins to feel insecure or become frustrated with schoolwork.

## **6 THE CHILD PSYCHOTHERAPY PROGRESS NOTES PLANNER**

- D. The client has started to show greater self-control in the classroom and inhibit the impulse to act out in order to draw attention to himself/herself.
- E. The client has demonstrated a significant decrease in his/her disruptive and negative attention-seeking behavior.

### **10. Low Frustration Tolerance (7)**

- A. The client has developed a low frustration tolerance as manifested by his/her persistent pattern of giving up easily when encountering difficult or challenging academic tasks.
- B. The client's frustration tolerance with his/her schoolwork has remained very low.
- C. The client has started to show improved frustration tolerance and has not given up as easily or as often on his/her classroom or homework assignments.
- D. The client has demonstrated good frustration tolerance and consistently completed his/her classroom/homework assignments without giving up.

### **11. Test-Taking Anxiety (8)**

- A. The client described a history of becoming highly anxious before or during tests.
- B. The client's heightened anxiety during tests has interfered with his/her academic performance.
- C. The client shared that his/her test-taking anxiety is related to fear of failure and of meeting with disapproval or criticism by significant others.
- D. The client has begun to take steps (e.g., deep breathing, positive self-statements, challenging irrational thoughts) to reduce his/her anxiety and feel more relaxed while taking tests.
- E. The client reported a significant decrease in the level of anxiety while taking tests.

### **12. Excessive Parental Pressure (9)**

- A. The client has viewed his/her parents as placing excessive or unrealistic pressure on him/her to achieve academic success.
- B. The parents acknowledged that they have placed excessive or unrealistic pressure on the client to achieve academic success.
- C. The parents denied placing excessive or unrealistic pressure on the client to achieve; instead, they attributed the client's lowered academic performance to his/her lack of motivation and effort.
- D. The client reported that his/her parents have decreased the amount of pressure they placed on him/her to achieve academic success.
- E. The parents have established realistic expectations of the client's level of capabilities.

### **13. Excessive Criticism (9)**

- A. The client described the parents as being overly critical of his/her academic performance.
- B. The client expressed feelings of sadness and inadequacy about critical remarks that his/her parents have made in regard to his/her academic performance.
- C. The client acknowledged that he/she deliberately refuses to do school assignments when he/she perceives the parents as being overly critical.
- D. The parents acknowledged that they have been overly critical of the client's academic performance.
- E. The parents have significantly reduced the frequency of their critical remarks about the client's academic performance.

### **14. Lack of Motivation (9)**

- A. The client verbalized little motivation to improve his/her academic performance.
- B. The client has often complained of being bored with or disinterested in his/her schoolwork.
- C. The client verbally acknowledged that his/her academic performance will not improve unless he/she shows more interest and puts forth greater effort.

- D. The client has shown more interest in his/her schoolwork and put forth greater effort.
- E. The client's renewed interest and motivation have contributed to improved academic performance.

**15. Environmental Stress (10)**

- A. The client's academic performance has markedly declined since experiencing stressors within his/her personal and/or family life.
- B. The client's academic performance has decreased since his/her family moved and he/she changed schools.
- C. The client has not been able to invest sufficient time or energy in his/her schoolwork because of having to deal with environmental stressors.
- D. The client has begun to manage his/her stress more effectively so that he/she has more time and energy to devote to schoolwork.
- E. The client's academic performance has improved since resolving or finding effective ways to cope with environmental stressors.

**16. Loss or Separation (10)**

- A. The client's academic performance has decreased significantly since experiencing the separation or loss.
- B. The client verbalized feelings of sadness, hurt, and disappointment about past separation(s) or loss(es).
- C. The client has taken active steps (i.e., socialized regularly with peers, studied with peers, participated in extracurricular activities) to build a positive support network at school to help him/her cope with past separation(s) or loss(es).
- D. The client's academic interest and performance have increased substantially since working through his/her grief issues.

## INTERVENTIONS IMPLEMENTED

**1. Coordinate Psychoeducational Testing (1)\***

- A. The client received a psychoeducational evaluation to rule out the presence of a learning disability that could be contributing to his/her academic underachievement.
- B. The client was cooperative during the psychoeducational testing and appeared motivated to do his/her best.
- C. The client was uncooperative during the psychoeducational testing and did not appear to put forth good effort.
- D. The client's resistance during the psychoeducational testing appeared to be due to his/her feelings of insecurity and opposition to possibly receiving special education services.
- E. The client, his/her family, and school officials were provided with feedback regarding the psychoeducational evaluation.

**2. Coordinate Psychological Testing for ADHD/Emotional Factors (2)**

- A. The client received a psychological evaluation to help determine whether he/she has ADHD, which may be contributing to his/her low academic performance.

\*The numbers in parentheses correlate to the number of the Therapeutic Interventions statement in the companion chapter with same title in *The Child Psychotherapy Treatment Planner*, Third Edition (Jongsma, Peterson, and McInnis) by John Wiley & Sons, 2003.

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- B. The client received psychological testing to help determine whether emotional factors are contributing to his/her low academic performance.
- C. The client was uncooperative and resistant during the evaluation process.
- D. The client approached the psychological testing in an honest, straightforward manner and was cooperative with the examiner.
- E. The client, his/her family, and school officials were provided with feedback regarding the psychological evaluation.

### **3. Obtain Psychosocial History (3)**

- A. A psychosocial assessment was completed to gather pertinent information about the client's past academic performance, developmental milestones, and family history of educational achievements and failures.
- B. The client and parents were cooperative in providing information about the client's early developmental history, school performance, and family background.
- C. A review of the client's background revealed a history of developmental delays and low academic performance.
- D. The psychosocial assessment revealed a family history of academic underachievement and failures.
- E. The psychosocial assessment revealed a history of strong expectations being placed on family members to achieve academic success.

### **4. Refer for Hearing/Vision/Medical Examination (4)**

- A. The client was referred for a hearing and vision examination to rule out possible problems that may be interfering with his/her school performance.
- B. The client was referred for a medical evaluation to rule out possible health problems that may be interfering with his/her school performance.
- C. The hearing examination results revealed the presence of problems that are interfering with the client's academic performance.
- D. The vision examination revealed the presence of problems that are interfering with the client's school performance.
- E. The medical examination revealed the presence of health problems that are interfering with the client's school performance.
- F. The client has not been evaluated for hearing, vision, or medical concerns and the parents were redirected to coordinate this evaluation.

### **5. Attend IEPC Meeting (5)**

- A. The client's Individualized Educational Planning Committee (IEPC) meeting was held with the parents, teachers, and school officials to determine the client's eligibility for special education services, to design educational interventions, and to establish educational goals.
- B. The recommendation was made to the IEPC that the client receive special education services to address his/her learning problems.
- C. At the IEPC meeting, it was determined that the client is not in need of special education services because he/she does not meet the criteria for a learning disability.
- D. The IEPC meeting was helpful in identifying specific educational goals.
- E. The IEPC meeting was helpful in designing several educational interventions for the client.

### **6. Arrange for Appropriate Classroom (6)**

- A. Based on the IEPC goals and recommendations, arrangements were made for the client to be moved to an appropriate classroom setting to maximize his/her learning.

- B. The client has been moved to a more appropriate classroom setting, and the benefits of this were reviewed.
- C. Despite specific recommendations, the client has not been moved to a more appropriate classroom setting, and further advocacy was provided in this area.

**7. Consult about Teaching Intervention Strategies (7)**

- A. A consultation was held with the client, parents, and school officials about designing effective teaching programs for intervention strategies that build on the client's strengths and compensate for his/her weaknesses.
- B. The client, parents, and teachers were assisted in identifying several learning or personality strengths that the client can utilize to improve his/her academic performance.
- C. The consultation meeting with the client, parents, and school officials identified the client's weaknesses and intervention strategies that he/she can utilize to overcome his/her problems.

**8. Refer for Private Tutoring (8)**

- A. The recommendation was given to the parents to seek private after-school tutoring for the client to boost the client's skills in the area of his/her academic weakness.
- B. The client and parents were noted to be agreeable to seeking private after-school tutoring.
- C. The client and parents reported that private tutoring has helped to improve the client's academic performance, and the benefits of this change were reviewed.
- D. The client and parents reported that private tutoring has not led to the desired improvements in the client's academic performance, and a discussion was held about whether to continue the tutoring.
- E. The client and parents were noted to be opposed to the idea of seeking private after-school tutoring.

**9. Refer to Private Learning Center (9)**

- A. The client was referred to a private learning center for extra tutoring in the areas of academic weakness and for assistance in improving his/her study and test-taking skills.
- B. The client reported that the extra tutoring and support provided by the private learning center have helped improve his/her performance in the areas of his/her academic weakness; the benefits of this improvement were reviewed.
- C. The client reported that his/her performance in the areas of academic weakness has not improved since attending the private learning center, but was encouraged to continue.
- D. The client reported that his/her study and test-taking skills have improved since attending the private learning center, and the benefits of this improvement were reviewed.
- E. The client's study skills and test performances have not improved since attending the private learning center, and a discussion was held about whether to continue the use of the private learning center.

**10. Teach Study Skills (10)**

- A. The client was assisted in identifying a list of good locations to study.
- B. The client was instructed to remove noise sources and eliminate as many distractions as possible when studying.
- C. The client was instructed to outline or underline important details when studying or reviewing for tests.
- D. The client was encouraged to use a tape recorder to help him/her study for tests and review important facts.
- E. The client was instructed to take breaks in studying when he/she becomes distracted and has trouble staying focused.

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### **11. Utilize Peer Tutor (11)**

- A. The recommendation was given to parents and teachers that the client be assigned a peer tutor to improve his/her study skills and address areas of academic weakness.
- B. The client verbalized a desire and willingness to work with the recommended peer tutor to improve his/her study skills and academic performance.
- C. The client expressed opposition to the idea of working with a peer tutor to improve his/her study skills and academic performance, but was encouraged to use this resource.
- D. The client reported that peer tutoring has helped to improve his/her study skills and academic performance, and the benefits of this resource were highlighted.
- E. The client reported that peer tutoring has not helped to improve his/her study skills and academic performance, but was encouraged to continue.
- F. The client has not taken advantage of working with and learning from the peer tutor and was redirected to utilize this resource.

### **12. Teach Test-Taking Strategies (12)**

- A. The client was asked to review a list of effective test-taking strategies to improve his/her academic performance.
- B. The client was encouraged to review classroom material regularly and study for tests over an extended period of time.
- C. The client was instructed to read the instructions twice before responding to questions on a test.
- D. The client recognized the need to recheck his/her work to correct any careless mistakes or improve an answer; he/she was praised for this helpful technique.

### **13. Teach Guided Imagery or Relaxation Techniques (13)**

- A. The client was trained in the use of guided imagery and deep muscle relaxation techniques to help reduce the level of his/her anxiety before or during the taking of tests.
- B. The client reported a positive response to the use of guided imagery and deep muscle relaxation techniques to help decrease his/her anxiety before and during the taking of tests.
- C. The client appeared uncomfortable during the therapy session when being instructed on the use of guided imagery and deep muscle relaxation techniques.
- D. The client was encouraged to continue to practice the use of guided imagery and deep muscle relaxation techniques, even though he/she reports little or no improvement in the reduction of his/her level of anxiety or frustration since the previous therapy session.

### **14. Maintain Communication between Home and School (14)**

- A. The parents and teachers were encouraged to maintain regular communication via phone calls or written notes regarding the client's academic progress.
- B. The client's teachers were asked to send home daily or weekly progress notes informing the parents about the client's academic progress.
- C. The client was informed of his/her responsibility to bring home daily or weekly progress notes from school, allowing for regular communication between parents and teachers.
- D. The parents were supported as they identified the consequences for the client's failure to bring home a daily or weekly progress note from school.
- E. It was noted that the increased communication between teachers and parents via phone calls or regular progress notes has been a significant contributing factor to the client's improved academic performance.
- F. The parents have not maintained regular contact with the child's teachers and were redirected to do so.



**15. Assign Self-Monitoring Checklists (15)**

- A. The client was encouraged to utilize self-monitoring checklists to increase completion of school assignments and improve academic performance.
- B. The client reported that the use of the assigned self-monitoring checklists has helped him/her to become more organized and to complete school assignments on time.
- C. The client's teachers were consulted about the use of self-monitoring checklists in the classroom to help him/her complete school and homework assignments on a regular, consistent basis.
- D. Parents and teachers were instructed to utilize a reward system in conjunction with the self-monitoring checklists to increase the client's completion of school and homework assignments and improve his/her academic performance.
- E. The client has failed to consistently use self-monitoring checklists and as a result has continued to have trouble completing his/her school and homework assignments; he/she was encouraged to use the checklists.

**16. Use Assignment Planner or Calendar (16)**

- A. The client was strongly encouraged to use a planner or calendar to record school and homework assignments and plan ahead for long-term assignments.
- B. It was noted that the client's regular use of a planning calendar has helped him/her complete classroom and homework assignments on a consistent basis.
- C. The client reported that the use of a planning calendar has helped him/her plan ahead for long-term assignments, and he/she was encouraged to continue.
- D. The client has failed to use a planning calendar consistently and has continued to struggle to complete school/homework assignments; he/she was redirected to use this technique.
- E. It was noted that the client's ADHD symptoms have contributed to his/her failure to use a planner or calendar on a regular basis.

**17. Monitor Assignment Completion (17)**

- A. The client's completion of school and homework assignments was monitored.
- B. The "Getting It Done" program from the *Brief Child Therapy Homework Planner* (Jongsma, Peterson, and McInnis) was utilized to help the client complete his/her school and homework assignments on a consistent basis.
- C. The parents and teachers were encouraged to utilize daily or weekly school reports from the "Getting It Done" program to help them communicate regularly about how well the client is doing at completing his/her school and homework assignments.
- D. Regular communication between the parents and teachers was noted to have helped the client to complete his/her school and homework assignments on a consistent basis.
- E. The client, parents, and teachers were encouraged to utilize the reward system outlined in the "Getting It Done" program to help the client complete his/her school and homework assignments on a regular basis.
- F. The reward system has helped motivate the client to complete his/her school and homework assignments.

**18. Develop Study and Recreation Schedule (18)**

- A. The client and parents were assisted in developing a routine schedule to help the client achieve a healthy balance between completing homework assignments and engaging in independent play or spending quality time with family and peers.
- B. The client has followed the agreed on schedule and has been able to successfully complete homework assignments and engage in independent play or spend quality time with family and peers.

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- C. The client has failed to consistently complete his/her homework assignments because he/she has not followed the agreed on schedule.

### **19. Encourage Positive Reinforcement (19)**

- A. The parents and teachers were encouraged to provide frequent positive reinforcement to maintain the client's interest and motivation in completing his/her school/homework assignments.
- B. The parents and teachers were challenged to look for opportunities to praise the client for being responsible or successful at school, instead of focusing on times when the client failed to behave responsibly or achieve success.
- C. Today's session explored the contributing factors or underlying dynamics that prevent the parents from offering praise and positive reinforcement on a consistent basis.

### **20. Identify Rewards to Maintain Motivation (20)**

- A. The client and parents were helped to develop a list of possible rewards or positive reinforcers that would increase the client's interest and motivation to complete his/her school assignments.
- B. The client signed a written contract specifying the positive reinforcers that are contingent on completion of his/her school assignments.
- C. The rewards and positive reinforcers have helped to maintain the client's interest and motivation in completing his/her school assignments.
- D. The client and parents have not used rewards to maintain motivation and were redirected in this area.

### **21. Teach Stress-Coping Strategies (21)**

- A. The client was taught guided imagery and relaxation techniques to help decrease the level of his/her anxiety and frustration when encountering difficult or challenging school assignments.
- B. The client was encouraged to utilize positive self-talk as a means of decreasing anxiety and managing frustration when encountering difficult or challenging school assignments.
- C. The client was taught cognitive restructuring techniques to decrease his/her anxiety and frustrations associated with schoolwork.
- D. The client reported that the use of the assigned positive coping mechanisms (e.g., relaxation techniques, positive self-talk, cognitive restructuring) has helped to decrease his/her level of anxiety and frustration when encountering difficult or challenging school assignments.
- E. The client reported experiencing little or no reduction in the level of his/her anxiety or frustration through the use of the assigned relaxation techniques, positive self-talk, or cognitive restructuring.

### **22. Explore Family Stress (22)**

- A. A family therapy session was held to explore the dynamics that may be contributing to the client's lowered academic performance.
- B. The family members were asked to list the stressors that have had a negative impact on the family.
- C. The family members were asked to identify the things that they would like to change within the family.
- D. The parents were supported as they acknowledged how their marital problems are creating stress for the client and agreed to seek marital counseling.
- E. The parents refused to follow through with the recommendation for marital counseling.

### **23. Encourage Parental Involvement (23)**

- A. The parents were strongly encouraged to demonstrate regular interest in and involvement with the client's school activities and homework.
- B. The parents were encouraged to attend the client's school conferences.
- C. The parents were encouraged to read aloud or alongside the client on a regular basis to improve his/her reading skills.

- D. The parents were encouraged to use flashcards on a regular basis to improve the client's math skills.
- E. The parents were encouraged to work with the client each school night to improve his/her spelling abilities.
- F. Despite encouragement, the parents have not become more involved in the client's schoolwork and were reminded about the necessity of this involvement.

**24. Use Systematic Rewards (24)**

- A. The parents and teachers were consulted about using systematic rewards to reinforce the client's academic progress and accomplishments.
- B. A reward system was designed to reinforce the client's completion of school and homework assignments.
- C. A reward system was designed to reinforce the client for achieving his/her academic goals.
- D. The parents and teachers were strongly encouraged to provide frequent praise for the client when he/she achieves academic success.
- E. The parents and teachers were encouraged to utilize a star chart to reinforce the client for his/her academic progress and achievements.
- F. The parents and teachers have not used a systematic reward program and were redirected in this area.

**25. Explore/Confront Unrealistic Parental Expectations (25)**

- A. A family therapy session was held to explore whether the parents have developed unrealistic expectations or are placing excessive pressure on the client to perform.
- B. The client and parents were supported as they discussed and identified more realistic expectations about the client's academic performance.
- C. The parents were confronted and challenged about placing excessive pressure on the client to achieve academic success.
- D. Today's family therapy session explored the reasons why the parents have placed excessive pressure on the client to achieve academic success.
- E. The client was seen individually to allow him/her to express thoughts and feelings about excessive pressure placed on him/her by parents.
- F. A family therapy session was held to provide the client with an opportunity to express anger, frustration, and hurt about parents placing excessive pressure on him/her.

**26. Encourage Parents to Set Firm Limits for Homework Refusal (26)**

- A. The parents were strongly encouraged to set firm, consistent limits and utilize natural, logical consequences for the client's refusal to do his/her homework.
- B. Positive feedback was provided as the parents identified a list of consequences to use for the client's refusal to do homework.
- C. The parents reported that the client has responded positively to their limits or consequences and has begun to complete his/her homework assignments on a regular, consistent basis; the benefits of setting limits and consequences were reviewed.
- D. The client has refused to comply with his/her parents' request to complete homework assignments, even though the parents have begun to set firm limits; the parents were encouraged to continue.
- E. The parents were instructed to follow through with firm, consistent limits and not become locked into unhealthy power struggles or arguments with the client over his/her homework each night.
- F. The client was asked to repeat the rules surrounding his/her homework to demonstrate an understanding of the parents' expectations of him/her.

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### 27. Assess Parents' Overprotectiveness (27)

- A. A family therapy session was conducted to explore whether the parents' overprotectiveness or infantilization of the client contributes to the client's academic underachievement.
- B. The parents were helped to see how their pattern of overprotectiveness or infantilization contributes to the client's academic underachievement.
- C. The client and parents were helped to recognize the secondary gain that is achieved through the parents' pattern of overindulging or infantilizing the client.
- D. The parents were instructed to expect some resistance (e.g., crying, complaining, exhibiting temper outbursts) when they begin to terminate their pattern of overprotectiveness or infantilization.
- E. The parents were encouraged to remain firm and follow through with consistent limits when the client tests them about doing his/her homework.
- F. The parents were helped to develop realistic expectations of the client's learning potential.
- G. The client and parents were assisted in developing realistic academic goals that were in line with the client's learning potential.

### 28. Consult School Officials to Improve On-Task Behavior (28)

- A. The therapist consulted with school officials about ways to improve the client's on-task behavior.
- B. The recommendation was made that the client sit toward the front of the class or near positive peer role models to help him/her stay focused and on task.
- C. The teachers were encouraged to call on the client often during the class to maintain the client's interest and attention.
- D. The teachers were instructed to provide frequent feedback to the client to maintain his/her interest and motivation to complete school assignments.
- E. The recommendation was given to teachers to break the client's larger assignments into a series of smaller tasks.

### 29. Assign Reading Material on Organization and Study Skills (29)

- A. The client was assigned to read material designed to improve his/her organizational and study skills.
- B. The client was instructed to read *13 Steps to Better Grades* (Silverman) to improve his/her organizational and study skills.
- C. The client's reading of *13 Steps to Better Grades* was processed in today's therapy session.
- D. After reading *13 Steps to Better Grades*, the client was able to identify several positive study skills that will help him/her remain organized in the classroom.
- E. The client has not read the information on improving his/her organizational and study skills and was redirected to do so.

### 30. Reinforce Successful School Experiences (30)

- A. The parents and teachers were encouraged to reinforce the client's successful school experiences.
- B. The client was given the homework assignment of making one positive statement about school each day.
- C. All positive statements by the client about school were noted and reinforced.
- D. The client was helped to realize how his/her negativistic attitude about school interferes with his/her ability to establish peer friendships.

### 31. Confront Self-Disparaging Remarks (31)

- A. The client was confronted about his/her self-defeating pattern of making derogatory comments about himself/herself and giving up easily when encountering difficulty with schoolwork.

- B. The client was instructed to use positive self-talk when encountering difficult or challenging tasks at school instead of making disparaging remarks about himself/herself and giving up easily.
- C. The client was directed to verbalize at least one positive self-statement around others at school.
- D. The client has not made positive self-descriptive statements around others at school and was redirected to use this positive self-talk on a regular basis.

**32. Record Positive Statements about School (32)**

- A. The client was assigned the task of making one positive statement daily about school, and either recording the statement in a journal or writing it on a sticky note to place in the kitchen or in his/her bedroom.
- B. The client was compliant with the homework assignment to record at least one positive statement daily about his/her school experiences.
- C. After reviewing the positive statements about school recorded in the journal, the client was encouraged to engage in similar positive behaviors that would help make school a more rewarding and satisfying experience.
- D. The client did not cooperate with the homework assignment to record at least one positive statement daily about his/her school experiences.

**33. Increase Motivation (33)**

- A. The client was assisted in developing a list of possible rewards or positive reinforcements that would increase his/her motivation to improve academic performance.
- B. The client signed a written contract specifying the positive reinforcers that are contingent on him/her achieving specific academic goals.
- C. A consultation was held with the parents and teachers about using specific rewards to reinforce the client's improved academic performance.

**34. Use Individual Play Therapy (34)**

- A. An individual play therapy session was conducted with the client to help him/her work through and resolve painful emotions, core conflicts, or stressors that have impeded his/her academic performance.
- B. A psychoanalytic play-therapy approach was utilized to explore the core conflicts that are impeding the client's academic performance.
- C. The client made productive use of the individual play-therapy session to express his/her painful emotions surrounding core conflicts or significant stressors.
- D. Client-centered play-therapy approaches were utilized to help the client identify and express his/her painful emotions surrounding the core conflicts or significant stressors that impede his/her academic performance.

**35. Connect Feelings and Performance (35)**

- A. Today's therapy session explored underlying, painful emotions that may be contributing to the client's decrease in academic performance.
- B. Today's therapy session helped the client develop insight into how his/her lowered academic performance is related to underlying, painful emotions.
- C. Role-playing and modeling techniques were used to demonstrate appropriate ways for the client to express his/her underlying painful emotions.
- D. The client was helped to identify more effective ways to cope with his/her frustrations or painful emotions instead of giving up and/or refusing to do schoolwork.

**36. Teach Self-Control Strategies (36)**

- A. The client was taught deep breathing and relaxation techniques to inhibit the impulse to act out or engage in negative attention-seeking behaviors when encountering frustration with his/her schoolwork.
- B. The client was encouraged to utilize positive self-talk when encountering frustration with his/her schoolwork instead of acting out or engaging in negative attention-seeking behaviors.
- C. The client was taught mediational self-control strategies (e.g., “stop, look, listen, and think”) to inhibit the impulse to act out or engage in negative attention-seeking behaviors when encountering frustration with schoolwork.

**37. Review Past Periods of Academic Success (37)**

- A. The client was assisted in exploring periods of time when he/she completed schoolwork regularly and achieved academic success.
- B. The client was encouraged to use strategies or organizational skills similar to those that he/she had used in the past to achieve academic success.
- C. The client shared the realization that involvement in extracurricular or positive peer group activities increased his/her motivation to achieve academic success.
- D. The session revealed that the client was more disciplined with his/her study habits when he/she received strong family support and associated with positive peer groups.
- E. The client was helped to recognize that he/she achieved greater academic success in the past when he/she scheduled routine times to complete homework.

**38. Review Past Successful Coping Strategies (38)**

- A. The client was assisted in exploring other coping strategies that he/she had previously used to solve other problems.
- B. The client was encouraged to use coping strategies similar to those that he/she had used successfully in the past to overcome current problems associated with learning.
- C. The session revealed that the client overcame past learning problems when he/she sought extra assistance from teachers, parents, or peers.
- D. The client recognized that he/she was more successful in completing school assignments in the past when he/she used a planning calendar to record homework assignments and long-term projects; he/she was encouraged to return to these techniques.

**39. Identify Resource People within School (39)**

- A. The client was assisted in developing a list of resource people within the school whom he/she can turn to for support, assistance, or instruction when encountering difficulty or frustration with learning.
- B. After identifying a list of school resource people, the client was directed to seek support at least once from one of these individuals before the next therapy session.
- C. The client reported that the extra assistance he/she received from other individuals in the school helped him/her to overcome difficulty and learn new concepts or skills; the benefits of this technique were highlighted.

**40. Encourage Reward System for Independent Reading (40)**

- A. The parents were encouraged to use a reward system to reinforce the client for engaging in independent reading.
- B. The parents were encouraged to use the “Reading Adventure” program from the *Brief Child Therapy Homework Planner* (Jongsma, Peterson, and McInnis) to increase the client’s motivation to read on a regular basis.
- C. The parents were instructed to use the reward system in the “Reading Adventure” program to reinforce the client for engaging in independent reading.