488 Australian children aged 4-7 participated in a longitudinal study evaluating the effectiveness of a school-based cognitive behavioral program designed to reduce anxiety and enhance social and emotional competence. Results support the effectiveness of the program, demonstrating significantly greater improvements across several domains than both a comparison treatment group and a waitlist control group.

**Key Findings:**

- All three groups (new cognitive behavioral treatment, comparison treatment, waitlist control) improved significantly over time. However, the two active treatment groups demonstrating superiority over the waitlist group.
- At post intervention, the new cognitive behavioral group was comparable to or better than the comparison treatment group on indices of behavioral and emotional strength, behavioral difficulties, behavioral inhibition (shyness and social withdrawal), and parenting distress.
- At 12-month follow-up, the cognitive behavioral group was superior to both comparison groups across measures.
- The cognitive behavioral group was effective for children regardless of their baseline anxiety level.

**Implications for Programs:**

- Programs may want to consider offering opportunities to facilitate social and emotional competence among young children.
- Programs may want to consider partnering with schools and community agencies to offer additional support services for children showing signs of anxiety.

**Implications for Policies:**

- Policies could support cost-benefit analyses related to implementing universal prevention programs versus treatment for anxiety disorders and related problems.
- Policies could allocate funding for a limited number of schools in the United States to adopt prevention and/or intervention programs in order to assess the feasibility of broader implementation across the country.

**Avenues for Future Research:**

- Future research could seek to replicate the findings in the United States, incorporating additional assessment measures and longer-term follow-up.
- Future research may want to include psychoeducational sessions that are easily accessible (e.g., via internet) to improve parental participation.
104 Catholic schools in Brisbane, Australia were invited via email correspondence to participate in the study.

Fourteen schools agreed to participate and were randomly assigned to a cognitive behavioral intervention group, an active treatment comparison group, or a waitlist group.

Interventions in both active treatment groups were delivered by teachers.

Parents completed a battery of questionnaires evaluating their child's anxiety, shyness, emotional and behavioral strengths, resilience, and psychological adjustment at three times: pre-intervention, post-intervention, and at 12-month follow-up. Parents also completed measures regarding their own depression, anxiety, and stress. Teachers also reported on resilience of the children.

Nearly half of participants had missing data on at least one observation; analyses were limited to complete data points.

Data were factor analyzed, resulting in a 4-factor solution (behavioral inhibition, behavioral and emotional strength, behavioral difficulties, and parental distress). Analysis of covariance was used to evaluate the effect of the intervention on those factors.

488 Australian children (271 females, 217 males), aged 4-7, from 14 schools participated in the study.

159 children were in the intervention group (95 females), 196 in the comparison group (101 females), and 133 (75 females) in the waitlist group.

Most participants were White and middle or lower class.

Parents, particularly those in the treatment groups, may have been influenced by social desirability.

The researchers noted potential problems with lack of continuity and delivery of the program which may have affected findings.

There were large amounts of missing data from the father response measures which may have affected those outcomes.

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