

# Extended CBT assessment for children and young people

This includes the Basic CBT Assessment but has additional items.

## 1 DEFINING THE CURRENT PROBLEM(S)

### What are the current problems?

For each problem:

- Where does it occur?
- When does it occur?
- With whom does it occur?
- What makes it better?
- What makes it worse?

### Analysis of specific incident/situation relating to each problem

Track a recent example: identify trigger(s) and plot sequence of events (including thoughts, feelings, behaviour, physiology and environment of child and others).

### Maintaining factors – what keeps the problem going?

Are there themes that might indicate underlying cognitions (rules for living and core beliefs) driving these processes?

## What is the history of each problem?

What is the history and duration of each problem?

- Onset – when did it begin?
- Course – how has the problem developed since its onset?
- Predisposing factors – anything in the child/family/school's background that made it likely that this problem would develop?

## 2 DEFINING THE CURRENT CONTEXT

Who are the significant people in the child's life?

- Family
  - Map the family: family tree
  - Who lives where etc.
  - Housing, job, finance
  - Family relationships e.g. parents (domestic violence?), siblings, grandparents
  - Current stresses and positives for all family members
- School
  - History of nursery/school attendance – and how child responded to separations
  - Learning history: strengths/difficulties
  - Behaviour
  - Bullying: victim or perpetrator
  - Attendance
- Peers
  - Strengths and difficulties
  - Number of friends, how easily do they make/keep friends
  - Parent's views on the peer group (e.g. a good/bad influence)
- Others.

What do these significant others do in relation to the problem(s)?

## 3 THE DEVELOPMENTAL CONTEXT

### Child development

- Pregnancy and birth
- Milestones: language, toileting, physical development
- Sleep and eating
- Temperament – how were they as a baby/child?
- Who looked after the child when young?
- Medical history: illness, disability, hospitalisations?

## Anti-social behaviour

- Alcohol/drugs
- Criminal behaviour.

## Life events

- Important things that have happened to the child, e.g. death, illness, parental separation.

## Parent–child relationships

- Attachment – past and present
- Parenting styles, e.g. how did they manage toddler tantrums; do parents agree on issues of discipline?
- Clinical impressions: what do you observe in the room?

## History of contact with services

- Map out other professionals involved
- Family members' views of this (things they liked/did not like about it; found helpful/not helpful).

## Parent history

- Family background and relationships
- Parenting history
- Significant life events, e.g. bereavements, miscarriages, job loss
- Mental health issues.

## Strengths

- Child/young person
- Family
- Peer group
- School
- Other.

## 4 UNDERLYING BELIEFS

- Initial ideas about the young person's and parents' underlying beliefs may be hypothesised from the developmental context.
- These should include consideration of beliefs about the self, other people and the world in general.
- Underlying beliefs by the parent(s) may be very central to the overall formulation of the problem.

## 5 SUITABILITY FOR CBT

- Is there reasonable evidence that CBT is likely to be effective with this problem?
- What are the child's wishes with respect to therapy?
- What is the capacity of the child and/or parent to engage in therapeutic work?
- What is the motivation for the problem(s) to change
  - In the child/young person?
  - In the parent or principle carer?
  - In the system around the child (e.g. school staff, peer group and social worker)?
- Are there goals for change that include the child/young person themselves rather than only significant others, and which the young person has some power to change?
- Is the child's cognitive and language ability good enough to allow them to engage in CBT adapted to suit their developmental level (i.e. it may be appropriate to undertake CBT with the parent/carer alongside the child).

## 6 WHAT ARE THE GOALS FOR THE INTERVENTION?

- What is the priority problem for the parent or principle carer?
- What is the priority problem for the child?
- What are the goals for different people in the wider system?
- Can you negotiate shared goals?
- Are these goals specific, measurable and achievable by the child and significant others?