

The Cool Kids Pilot Evaluation

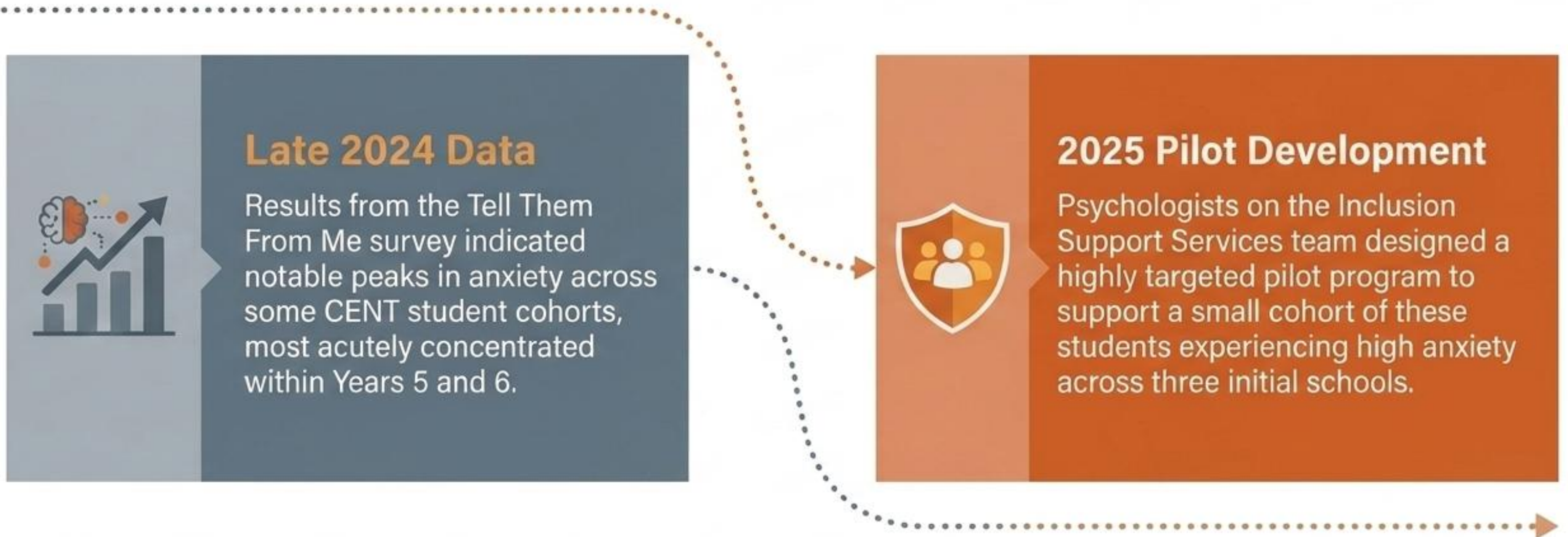
Assessing the impact of targeted cognitive-behavioural anxiety interventions in CENT primary schools.

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Inclusion Support Services

System data revealed peaks in anxiety among Year 5 and 6 cohorts



The overarching goal is a proactive, data-informed intervention before secondary school transition.

Understanding the Cool Kids Anxiety Program

Developed by Macquarie University and continuously refined since 1993, Cool Kids is a **skills-based** program designed to teach children, teenagers, and their caregivers how to better manage all types of anxiety.



Elements of Cool Kids Anxiety Program



Psychoeducation

Learning to identify, articulate, and understand personal feelings and anxiety triggers.



Cognitive Restructuring

Learning to challenge catastrophic thoughts and think realistically.



Exposure

'Fighting fear by facing fear' through gradual, supported exposure.



Parenting Anxious Behaviours

Equipping parents and caregivers with strategies for supporting an anxious child.



Applied Coping Skills

Building a practical toolkit including confidence-building, relaxation techniques, and problem-solving.

Intake process

Stage 1: School Alignment

Previous term meetings to explain logistics and secure school buy-in.

Stage 2: EOI & Identification

Schools send Expressions of Interest to families, guided by data (like My MindCheck) or staff discretion.

Stage 3: Clinical Screening

Psychologists secure informed consent, conduct brief interviews, and administer the Spence Children's Anxiety Scale.

The Selection Criteria

- Capacity to sit at a desk.
- Ability to recognise their own anxiety.
- Parent/caregiver capacity to support the student at home.
- English language comprehension.

Inclusivity Note

Students with disabilities are not excluded and provided accommodations where possible. For example, students with a Specific Learning Disability (SLD) are provided a scribe and transitioned to visual rather than written tasks.

School-based delivery model

4 to 6

Cohort Scale

Students (Years 5-6) paired with 2 to 3 trained facilitators.

1 hour

Student Sessions

Weekly group sessions. Highly flexible: if group dynamics impact progress, sessions are split into 30-minute 1:1 interventions later in the term.

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Parent/Caregiver Sessions

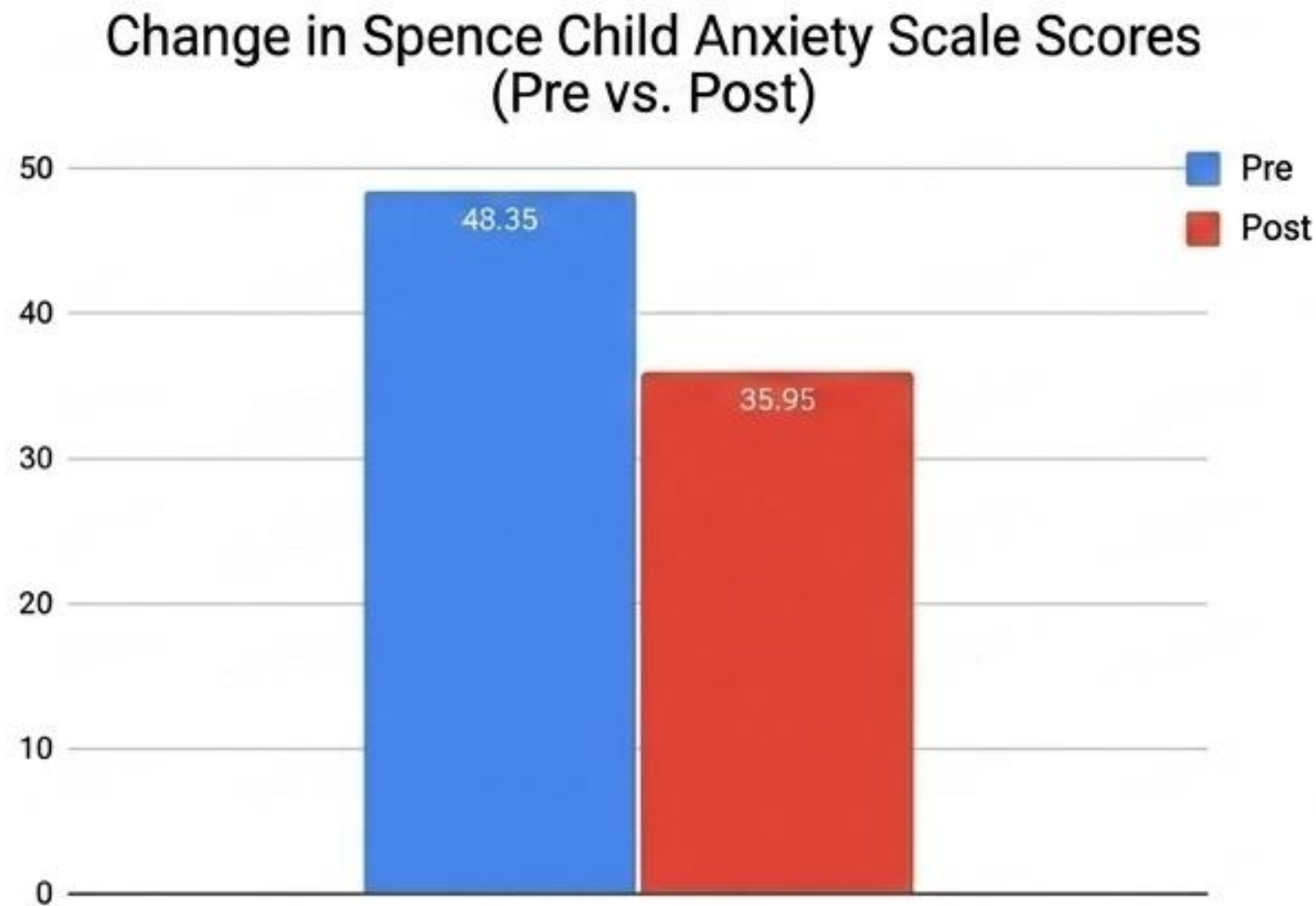
One in Week 1 (or earlier) for a detailed overview alongside a Cool Kids workbook, and a mid-term review session.

5

Current Footprint

Successfully completed in CENT primary schools across the Darwin and Palmerston area to date.

Summary of anxiety outcome measures



20 Students Tracked

Representing the completed dataset across the five primary schools.

Faith in their future

100% Clinical Clearance

8 out of the 20 students began the programme with total anxiety scores in the clinical range. Post-program, ALL 8 students dropped below the clinical threshold. The remaining 12 had at least one subdomain in the clinical range initially.

Further summary of results

Systemic Success



Every single one of the 5 participating schools recorded an overall improvement in total anxiety amongst their targeted small cohort.

Understanding the Outliers



For 4 out of the 20 students, total anxiety scores increased during the 10-week delivery period.

Clinical Rationale

This is an expected nuance in cognitive-behavioural interventions, attributed to two main factors:

- **External Variables:** The student experienced an acute stressful life event during the 10-week delivery window.
- **Symptom Recognition:** The curriculum successfully generated a greater self-awareness of their own anxiety, temporarily elevating self-reported scores.

Primary challenges

	Ideal Scenario	On-the-Ground Reality	Resulting Friction
Caregiver Buy-In	Caregivers understand the goals and reinforce learnings at home.	Despite repeated emphasis during consent and providing one-page summaries, capacity at home varies.	Identifying true caregiver capacity at the outset remains difficult, directly impacting student success.
Pace of Progress	Students and families set realistic goals for anxiety reduction.	As Macquarie University notes, improvement in anxiety symptoms is non-linear.	Families and students easily lose motivation when changes aren't as rapid or predictable as expected.

Expanding our footprint and building sustainable system oversight.



Immediate Expansion

By the end of this year, the program will be delivered to six CENT primary schools in the Darwin and Palmerston area and 1 secondary school.

Regional Delivery

Future phases aim to service schools currently outside the pilot footprint, including Humpty Doo, Katherine, Alice Springs, and Aboriginal remote areas.

Systemic Integration

Initiating conversations to see how school staff can independently run programs for students with low levels of anxiety in line with reviewing systemic data.