The Effectiveness of Various Types of Psychological Correction of Anxiety in Primary School

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Introduction. At different stages of development and education of children, there can be faced various psychoemotional difficulties which create prerequisites for impairment of the child’s personality development. It is known that 75% of the causes for all human diseases appear in childhood (Baevsky R.M., Berseneva A.P., 1997). The increase in the number of non-adapted children, especially in primary school, leads to difficulty in solving social and educational tasks. High school anxiety has been the most common marker of school disadaptation. According to many researchers, up to 30–40% of schoolchildren experience discomfort in their school life. These are children with increased school anxiety who are at risk of disadaptation (Tarasova S.Yu., Osnitskii A.K., 2015). It is believed that the implementation of school preventive programs in childhood rather than in adolescence provides the best results in the field of mental health (Nazish Imran et al, 2017). The key to successful work with an anxious child is an increase in self-esteem, training in self-control and relieving muscle tension (Danilenko E.N., Dzhafarova O.A., Grebneva O.L., 2010; Bartosh O.P., Bartosh T.P., 2016; Kopytin A.I., Svistovskaya E.E., 2014).

The aim of our study is to determine the results of different types of psychocorrectional measures: social and psychological training, method of biological feedback, and art therapy for indicators of childhood anxiety among younger schoolchildren.

Materials and Methods. The study was conducted in the secondary school of Magadan, North East of Russia (age 9-10 years, n = 43, among them 25 boys and 18 girls). To measure the anxiety of younger schoolchildren, we used the **MACA** - method of Multidimensional Assessment of Child Anxiety that includes 10 parameters

(“anxieties”) to give a differentiated assessment of anxiety of a person (Romitsyna E.E., 2006). The following correctional methods were used: socio-psychological training (**SPT**), biofeedback method (**BFB**), individual and group art therapy (**Sandplay Therapy**).

Students of **group I** (n=12) participated only in the SPT training. Each student participated in 10 training sessions. Students of **group II** (n=11) participated in the SPT and completed a course of self-regulation training using the BFB method. The course of the correction classes by the method of BFB consisted of 8-12 sessions for 20-30 minutes, two times a week. In remedial work with students of **group III** (n=20) the SPT (10 lessons), BFB (8-12 sessions), individual (3-4 meetings) and group sand therapy were used. At the final stage, control diagnostics of the level of child anxiety was carried out using the method of MACA in all the students.

Results. For students who participated only in psychological training (group I), after completing the course of the training sessions, there were significant 1.5–2 points reductions in the median (Me) values, by the 3 MACA scales of 10 (scales 2, 6, 7; chart). In group II, after the course of correctional activities, there were significant 1–4 points reductions in the median anxiety indices by the 5 scales of MACA (1, 3, 6, 7, 8). In group III, significant changes are visible in most of the scales of MACA. The average group median 1.5-3.5 points decreased ($p < 0.05$ – $p < 0.01$) within 7 scales of 10 (scales 1, 2, 5, 6, 7, 9, 10). Of note that it is the anxiety arising in situations of self-expression (scale 7) closely correlates with all scales of MACA ($r = 0.76$ – 0.93 ; $p < 0.01$). It is the fear of self-expression that is most closely associated with the rest of the structures of child anxiety.

The need to demonstrate their capabilities and self-doubt are the basis of school anxiety. It can be assumed that by conducting targeted work to reduce anxiety that arises in situations of self-expression, anxiety will be corrected in other areas. Our study showed that psycho-correction methods such as socio-psychological training, biofeedback method and Sand Therapy are effective ways that reduce anxiety and, in general, improve the psycho-emotional state of younger schoolchildren. It was revealed that the group (III) which underwent various remedial measures demonstrated the greatest number of changes: anxiety significantly decreased according to the 7 scales of the children’s anxiety questionnaire ($p < 0.05$ – $p < 0.01$). The combination of various methods of psycho-correction gives the best results in reducing anxiety.

Chart. Anxiety indices in younger schoolchildren before and after the correction sessions, (Me).

Note. MACA scales: 1 is for general anxiety; 2 is anxiety in relationships with age mates; 3 is anxiety in connection with the assessment of others; 4 is for anxiety in relationships with teachers; 5 is for anxiety in relationships with parents; 6 is anxiety associated with success in studying; 7 is for anxiety arising in situations of self-expression; 8 is anxiety arising in situations of testing knowledge; 9 is a decrease in mental activity associated with anxiety; 10 is for anxiety increase in autonomic reactivity. * – $p < 0.05$; ** – $p < 0.01$.