

TRAINING SCHOOL COUNSELLORS TO DELIVER GROUP-BASED COGNITIVE BEHAVIOURAL THERAPY (CBT) IN SCHOOLS

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Introduction

Mental health challenges among children and adolescents are escalating, with depression and anxiety being most prevalent. Group-based CBT delivered in schools by school counsellors can proactively address sub-clinical mood and anxiety difficulties. This integrates evidence-based intervention into students’ natural ecosystem.

BRACE-Up (Building Resilience Against Challenging Emotions - Upgraded) is an 8-session transdiagnostic group CBT intervention adapted from IMH’s BRACE program^[1] originally conducted by clinical psychologists.

Developed collaboratively by IMH clinical psychologists, NHG curriculum designers and MOE school counsellors, BRACE-Up is designed to be implemented in schools and it features:

- Manualized protocols for school counsellors
- Curriculum for both Primary and Secondary level students
- Comprehensive session materials for students and digital parent resources

Aim

The aim of this study is to find out if school counsellor’s competence in CBT can be increased through a 3-day training on CBT and BRACE-Up curriculum.

Method

A total of 16 school counsellors completed 3-day trainings on CBT and BRACE-Up curriculum, held between November 2025 and January 2026. We employed a pre-post study design with data collected prior to and after the training.

Participants:

- 7 school counsellors from Primary schools, 9 from Secondary schools
- 9.5 years average counselling experience (range: 9 months-20 years)

Training Components:

- Didactic teaching on the fundamental theoretical underpinnings of CBT, CBT skills and role-plays
- BRACE-Up curriculum familiarization and hands-on experience in running BRACE-Up sessions during training

Measures:

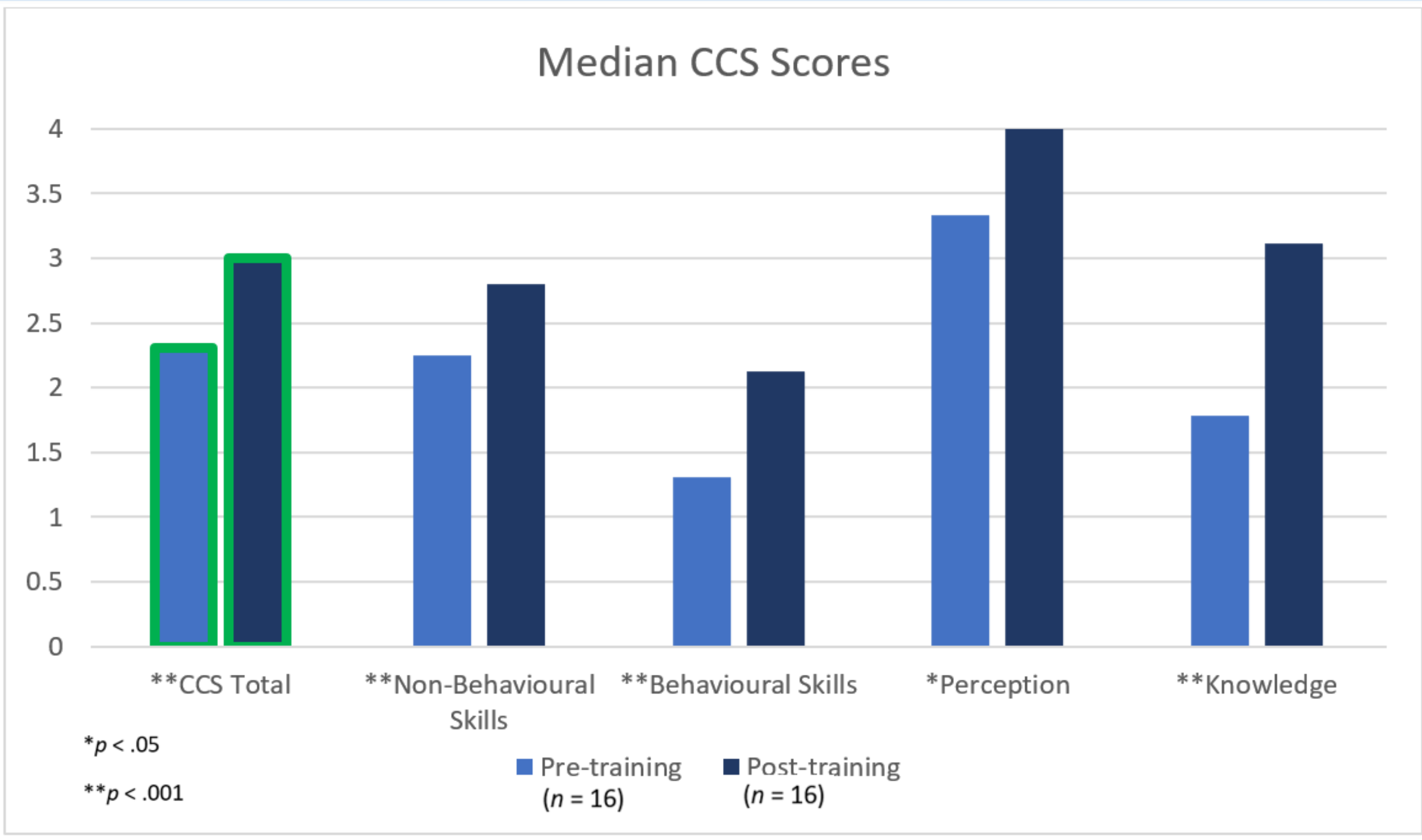
1. CBT Competence Scale (CCS)^[2]: Validated 4-dimensional measure (Non-Behavioural Skills, Behavioural Skills, Perception, Knowledge) where a total CCS score represents the mean of the 4 subscale mean scores. Scores range from 0-4, where higher scores indicate higher competence.
2. Post-Training Questionnaire: 5-point Likert scale evaluation on school counsellors’ experience of the training

Results – CBT Competence

Wilcoxon signed-rank tests revealed significant increases in overall CBT competence, and all 4 CCS subscales post-training.

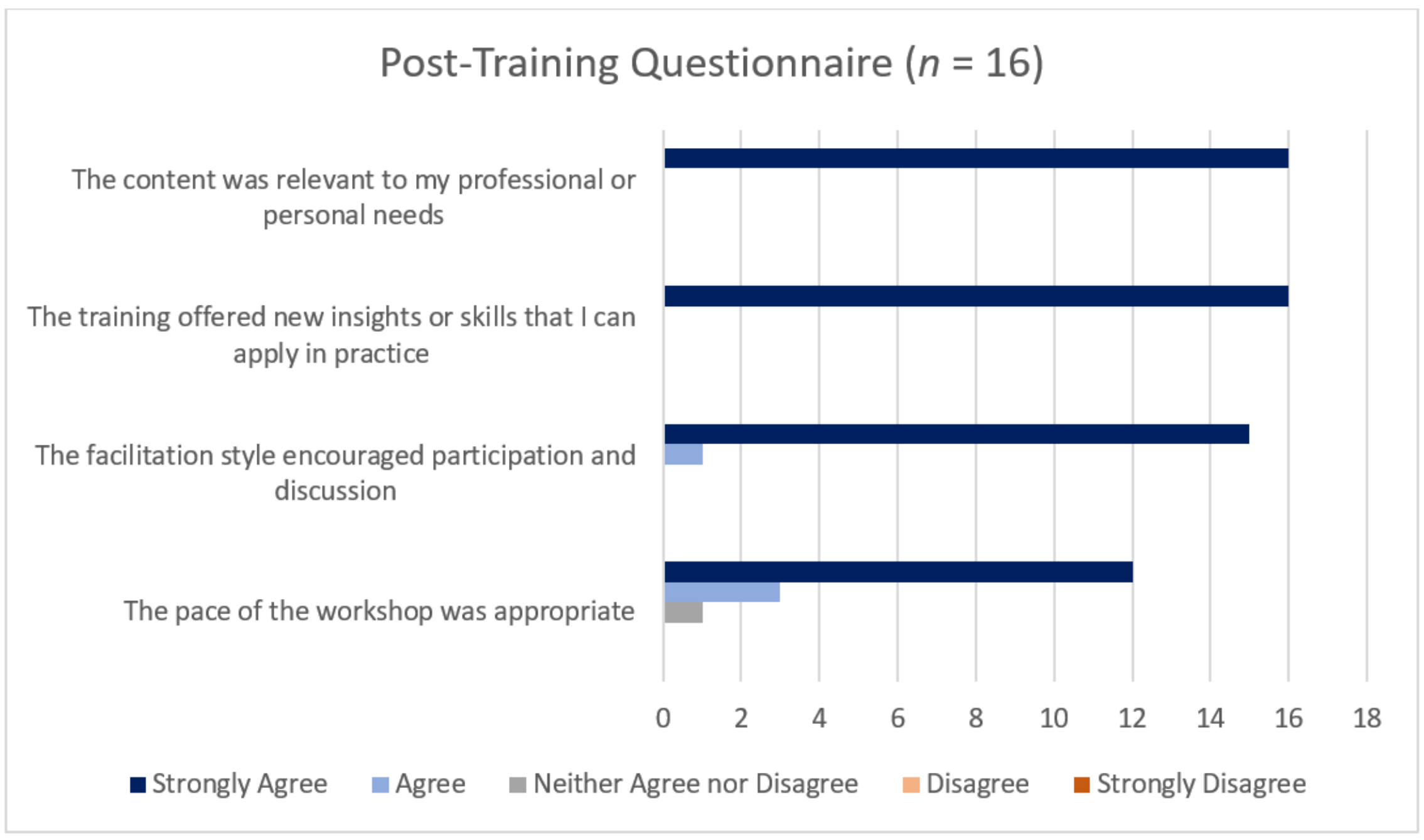
Pre-post CCS scores

	Total CCS Score (Median)	Non-Behavioural Skills (Median)	Behavioural Skills (Median)	Perceptions (Median)	Knowledge (Median)
Pre-training (n = 16)	2.31	2.25	1.31	3.33	1.78
Post-training (n = 16)	3.00	2.80	2.13	4.00	3.11
Wilcoxon signed-rank tests	Z = -3.52	Z = -3.42	Z = -3.52	Z = -2.32	Z = -3.54
p value	p < .001	p < .001	p < .001	p < .05	p < .001
Effect size r	r = 0.88	r = 0.85	r = 0.88	r = 0.58	r = 0.89



Results – School Counsellors’ Experience of the Training

- School counsellors found CBT training highly relevant and value adding
- The training effectively promoted active learning, while keeping the pace manageable



Discussion

- 3-day training enhanced counsellors’ CBT competency to levels equivalent to a more intensive program^[3]
- Training increased counsellors’ belief in CBT effectiveness, an important predictor of intervention implementation^[4] and therapy outcome^[5]

Key Implications

- School counsellors can be trained to be competent providers of CBT intervention in a relatively short period of time
- CBT can potentially reach large populations of students with mood/anxiety difficulties through manualized CBT groups in schools

Future Directions

- Evaluation of students’ outcomes from the BRACE-Up groups conducted by school counsellors
- Ongoing assessment of school counsellors’ CBT competency across implementation, to identify additional areas of support and/or training required

References

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