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The Butterfly Effect

'What effect has the BAP method on behavior , emotional state , physical condition and the cognitive state of traumatized children who grow up in a South African township ?'

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Colophon

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*For years
I remained
Hidden from view
Afraid to show myself
or my true colors.
Cloaked
Concealed
I endured.
Waiting for the spring
with the sunlight
the signal to emerge.
Slowly
Cautiously
I begin to unfold my wings,
finding the courage
discovering my strength.
In awe
I marvel at the array
Deepest sapphire blue
Renewing amethyst violet
Tranquil aquamarine
Iridescent blushing rose
Sparkling
Radiant
I take flight.*

Kirsti A. Dyer

Preface

This report has been developed as a thesis report for 'Bachelor of Creative Therapy' by us, Maike Berentzen and Viola Werner, students of Creative Therapy with specialization in Drama and Art at Stenden University, Leeuwarden. In the third year of our studies we did a one-year internship at the Butterfly Art project in Cape Town, South Africa. The Butterfly Art project is a creative therapeutic organization settled in the township Vrygrond. During our one-year internship at BAP we started researching the creative art therapeutic method, called BAP - method. The BAP method was developed by Angela Katschke, art therapist and director of the Butterfly Art Project and it pictures the metamorphose from a caterpillar to a butterfly. This transformation is translated to therapy for traumatized children. The BAP- method uses the metamorphosis of the caterpillar to butterfly as a symbolic guide for the therapeutic process.

This paper analyzes the effect of the BAP - method on traumatized children in a South African township context.

In April 2013, we initiated the practical part of the research by using the BAP - method with 16 traumatized children, - at the Butterfly Art Project, and finalized the theoretical part between November 2013 and April 2014. Writing this bachelor thesis was a big challenge for us and helped us to develop and grow professionally as well as personally for our future as art and drama therapists.

Acknowledgements

During our time in South Africa, we had the chance to experience the daily life of children, growing up in a Township from close up. We have learned a lot about their problems, their culture but also their contagious vitality, energy and hope. First of all, our very special thanks goes to the children at the Butterfly Art Project, who challenged and trusted us as therapists, participated in therapy with pleasure and passion and worked very hard on themselves and their problems.

We would especially like to thank art therapist, founder and director of the Butterfly Art Project Angela Katschke, who supported us in finding a suitable subject for the research, introduced us to the BAP - method and helped us creating the theoretical framework by contributing relevant literature and her professional experience. Also, we would like to thank our practical supervisor Klasien van der Deen at Stenden University, Leeuwarden, who helped us with our initial difficulties, when we started creating the research plan in South Africa and urgently needed professional advice in pursuing academic work. Back in the Netherlands, Karen Sikkel supported us in elaborating and analyzing informations and writing the final report. We would like to thank her too, for the great professional support and enthusiasm for our work. Furthermore, we would like to thank Marinus Spreen for supporting us in calculating and analyzing the results with the SPSS- program. Finally, we would also like to thank the teachers of Capricorn Primary School, who participated in our research, by completing questionnaires about our clients.

Leeuwarden, 7 April, 2014

Maike Berentzen and Viola Werner

Summary

This report has been developed as a thesis report for 'Bachelor of Creative Therapy' and forms a part of the examination. In this thesis, a quantitative research is done on the effect of the creative therapeutic BAP-method with traumatized children in the context of a South African township, on four different levels. Angela Katschke, art therapist, founder and director of the creative therapeutic organization Butterfly Art Project in Cape Town, South Africa developed the BAP-method, which was used by the researchers during the internship in the third year of their studies. Using this method during their work with traumatized children, gave the authors the motivation to research the effect of the method and herewith make a contribution to the development of the Butterfly Art Project. In the first part of the report, the goals are specified, relating on 3 levels which are the macro-, meso and micro level. Main heading and subheadings are formulated, after giving the problem statement. The goal of the research is to find out, which effect the BAP-method has on the condition of traumatized children, living in a South African township. The abbreviation part defines eventually unknown terms such as 'trauma' or 'PTSD', to make the report more comprehensible. Additionally, the content of the BAP-method is presented here and supported in the second part of the report, the theoretical framework, which is giving further important background informations - mainly about trauma- from current literature. The third part of the report, is showing the actual report in detail, describing the used measuring instruments, the objective target and data analysis techniques. This research is a quantitative research, measured with self- made questionnaires, which are based on trauma symptoms on four levels. Also participants of the research are specified in this chapter. The fourth and final part of the report contains the answers to the single subheadings, by listing the results on each level. The results are summarized in the conclusion and presented as overall result. The results and conclusion show, that the BAP – method does have a positive effect on the condition of traumatized children, who grow up in a South African township. The final discussion, is focused on the points of criticism and gives suggestions for further research.

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1. Introduction

1.1 Inducement and Motivation

The researchers have developed the motivation for this research while they were doing an internship at the Butterfly Art Project (BAP) in Cape Town, South Africa. Due to the fact that the BAP is located in a typical township, the researchers were able to get to know the culture and everyday life and experience how a great number of South Africa's people is living. South Africa is a big country with different people and different living conditions, the researchers are only focused on the living conditions of the people living in townships. In Vrygrond, a small township near Cape Town the children's mentality and their problems became especially clear to the writers. The children are daily confronted with poverty, illness and death. Almost every child lives in an unstable and insecure environment, where family members often abuse drugs or alcohol. All these things can cause domestic violence and sexual abuse. The whole township is a dangerous place for children to live in and they often have to witness terrible crimes happen on the streets. During their time in the BAP, the researchers found out that every child has experienced major traumatic events in his or her life, many have traumatic experiences on a regular basis. Based on the biggest topic here in the township – the trauma – the authors started to collect ideas on how to specify the topic and help develop therapy at the BAP with the research as well. With the support of internship tutor Angela Katschke, finally the decision has been made to research the BAP-method, an art therapeutic method, Katschke developed during her time in South Africa. She uses this method during her work with the children from Vrygrond, who are students of the Capricorn Primary School. Because the BAP-method has never been written down before, the researchers thought it would be helpful for future art therapy interns, who would like to work with that method and need some guidance, to write it down and research the effects of this method with clients in the context of a township environment (for the allocation of tasks, please see appendix 10). It is important for the development of the Butterfly Art Project, to research the BAP-method in order to show donors the positive effects or to find weak points in the method, which would need further development. The further the BAP develops, the more children can be treated for their traumas.

1.2 Reading guide

Chapter 1 consists of the introduction of the research which gives information about the background and motivation why the researchers chose this topic. Furthermore, there is a description of the research goals based on macro, meso and micro level and the problem definition with the main question including the subheadings which will be answered at the end (Chapter 5).

Chapter 2 gives an introduction of the theoretical frame which describes the different technical terms of the research and gives necessary background informations.

Chapter 3 describes the methods of the research. Here, it is clearly described which type of research it is, relevant instruments to measure the effect and the assembling and the analysis of methods are also presented.

Chapter 4 is a description of research targets where the results (measuring 1 and 2) are analyzed and which are divided in the different subheadings.

Chapter 5 contains the conclusion and discussion of the research meaning the repetition of the research question where the authors establish a link between the results of the research question in order to answer the research question. After that the researchers will describe further conclusions about confinements and recommendations in relation to the whole program. In the end, there is a discussion about open questions and points of criticism. Furthermore advice for further research will be given.

1.3 Research goal and intent

In this paragraph the intent of this research is described by using the macro-, meso- and micro level.

1.3.1 Macro level

Children from all over the world are suffering from trauma. An American study is reporting, that of 400 children 11.7%- of the children under the age of 14 have experienced at least one traumatic event. At the age of 18, the percentage of the same statistic increased to 43% (Amaya-Jackson & March, 1995). A German study tested 1035 adolescents between the ages of 12 and 17 and found out, that 22.5% could report at least one traumatic situation. 1.6% meet the criteria's of PTBS (Essau, 1999). The BAP-method is useful for art therapy students and art therapists worldwide, who work with traumatized children, especially in a context where the client experiences re-traumatization on a regular basis. Therapists can also adopt the method to work with children with other disorders, such as anxiety disorders. The research shows the effects of the BAP-method, so that therapists can see, whether this method meets their clients' needs and goals or not.

1.3.2 Meso level

This Bachelor thesis is written by order of Angela Katschke, art therapist and manager of the Butterfly Art Project in Cape Town, South Africa, who worked with the researchers and supported them during the research. The Butterfly Art Project is a young NGO (Non-governmental organization) in the process of becoming one of the biggest art therapy centers in South Africa. The BAP is completely funded by donations, that is why it is important to keep potential donors updated and show the effects of the work with the children to keep them interested and show them results. With this research, the authors would like to receive more support for the Butterfly Art Project by showing the effects of a method that Butterfly Art Projects therapists and students are using. The international character of this research meets the international orientation of Stellenbosch University, which means to work globally and develop into autonomous therapists with an understanding for cultural differences and influences. This Bachelor thesis is written in English to be useful for therapists and students internationally.

1.3.3 Micro level

This research presents the problems, social backgrounds and treatment of traumatized children in a developing country. The story of the caterpillar that becomes a butterfly, makes it understandable for the child, what therapy actually means and how the child is developing during the treatment. With this thesis the researchers want to contribute to the development of the Butterfly Art Project, so that more traumatized children can be helped in the future.

1.4 Problem statement

The clients of the Butterfly Art Project are children who grow up in a township, which means the children do not live in a safe and stable environment. All of BAP's clients did have one or more traumatic experiences in their lives. As described above, these children grow up in an area full of violence, drugs, alcohol, poverty and sickness. The only structure in their lives is the school they go to every day of the week. But they also have to go back to their traumatizing situation every day. The chance of re-traumatization is high. There is almost no chance of getting out of this situation.

With therapeutic trauma methods used in Western countries, the client is usually removed from his traumatizing environment before the therapy starts. It can be assumed that the child is then situated in a safe social environment. In the context of the townships in South Africa, it's often impossible to get the children out of their traumatizing home situation. Thereby the children don't know what a structured and safe social environment is and can get re-traumatized daily. Trauma methods, like the ones we know from Western countries wouldn't have the same effect and could make the situation even worse. There is no safe place within the family to catch the children and help them to go safely through the hard trauma-recovery, because other family members are often traumatized too. In a lot

of publications about the treatment of trauma it's said that a safe environment is a requirement for the trauma recovery. On the website of het landelijke kenniscentrum voor kinder- en jeugdpsychiatrie (KJP, 2014) it is written: 'Treatment of seriously traumatized children and adolescents demands a safe environment.' (Koelman, 2013 "Behandelbaarheid," para. 5). Also Govaerts (2008) is stating that 'Trauma-treatment demands a safe environment that can carry and support the client on the emotional level.'

The first step in trauma-treatment is the stabilization phase. In the context of the Township where the research was done, there is no "safe environment" by definition. Violence, poverty and illness are ruling in Vrygrond, the place, where the children grow up. (Where rainbows meet, 2010).

For this reason, Angela Katsche is putting the focus strongly on the safe place of the therapy room.

The schools' psychological counseling service Düsseldorf (2010) divides trauma symptoms into 4 levels: the behavior level, the emotional level, the cognitive and thinking level and the level of physical condition. Based on these levels, the researchers decided to analyze the effect of the BAP method with a quantitative research, using self-developed questionnaires.

Main heading:

'What effect has the BAP method on behavior , emotional state , physical condition and the cognitive state of traumatized children who grow up in a South African township ?'

Subheadings:

After the research, following questions can be answered:

- Does the BAP - Method have an effect on the development of the emotional condition of a traumatized child that grows up in a South African township after 8 weeks of therapy?
- Does the BAP - Method have an effect on the development of the cognitive/thinking level of a traumatized child, growing up in a South African township, after 8 weeks of therapy?
- Does the BAP - Method have impact on the development of the physical condition of a traumatized child, growing up in a South African township, after 8 weeks of therapy?
- Does the BAP - Method have an impact on the development of the behavior of a traumatized child, growing up in a South African township, after 8 weeks of therapy?

1.5 Abbreviation

1.5.1 Township

According to the Oxford dictionary (2013), a township *'(in South Africa) is a suburb or city of predominantly black occupation, formerly officially designated for black occupation by apartheid legislation:'*

1.5.2 Trauma

The term trauma comes from the Greek and means "wound" (Hemayat, 2013). In psychology, one speaks of a traumatic event, if this event is far beyond the limits of every day experiences and stress, if an escape is impossible and the psychic digestion is overburdening. Traumas caused by other people (for example rape, murder, assault) are particularly severe. After a trauma, the condition of an emotional numbing often appears which means that affected persons go through joylessness and a feeling of emptiness. This goes along with a loss of the skill to emotional closeness, so that affected persons find themselves separated from their environment and other people. The environment is experienced as dulled and muted, as if one is wrapped and trapped in cotton wool. Conditions of mental paralysis and shock often occur, which means that affected persons seem to be unemotional to the outside, while anxiety and panic are controlling the inside. The whole organism is alert and the body reacts with a fast, shallow breath, a high tonicity, immobility and an increased heart rate.

'Trauma means wound. Traumatized people are confronted with the experience to be completely

unprotected, powerless and helpless at other peoples or events (violent criminals, diseases, war, accidents) mercy in extremely stressful situations (...) In children and adolescents, traumatic experiences can cause physical and mental injuries, which can strongly affect the process of development and socialization' (Krall, 2007, p. 7)

1.5.3 Post traumatic stress disorder (PTSD)

The post-traumatic stress disorder is a psychiatric disorder that can emerge from traumatic experiences. One speaks of pathology, when the symptoms stay for a longer period of time. The main symptoms of PTSD are flashbacks, avoidance and increased irritability. Flashbacks are sudden and haunting memories about the traumatic event. They often appear in nightmares as well. For more information and DSM-5 diagnosis criteria's, please see attached documents (appendix 9).

1.5.4 BAP – Method

As described in the introduction, the BAP method is a creative art therapeutic method for traumatized children.

BAP is a short cut for the Butterfly Art Project. Angela Katschke, has developed an art therapeutic method that uses the metamorphosis of the caterpillar to the butterfly as a symbolic guide for the therapeutic process.

Katschke (personal communication, April 2013) believes that the traumatized child in therapy is going through a process that is comparable to the development from the caterpillar to the butterfly. In his book *The very hungry caterpillar*, Eric Carle (1994) describes this process in a child-friendly way. The little caterpillar, which lives in a safe egg first, then finds the way out, gets to know the world, eats a lot, grows, and then adjourns into a cocoon to eventually transform into a butterfly. In the therapeutic process, this means the client starts in a safe environment, feels safe, builds trust, becomes stable, which helps him or her to be able to learn, to develop, to feel and to grow. After that, the client gets an insight into his own development and leaves therapy with all the new resources. Translated to the therapy, this means that we have five phases in eight sessions. The BAP - Method serves as a guideline for the therapist, but can also be a guideline for the client.

The BAP – method includes eight sessions at 60 minutes in total, plus one extra session for filling out a questionnaire . It is part of the BAP – method to fill out two questionnaires, one in the third session of the therapy and the second one after following the BAP- method. Questionnaire 1 serves a diagnostic instrument and makes clear what the individual problems, symptoms and questions of the clients are and helps to plan the further therapy in the choice of the activities for the individual problem of the client. Questionnaire 2 shows the development and change after following the BAP- method and shows if further therapy is needed.

Before starting the research , the BAP – method was a guideline for Katschke herself to structure the therapy and to have a final goal for the clients. The BAP – method has not been written down before. During the research the questionnaires became a part of the BAP – method in session 3 and 9. The following table shows an overview of the BAP – method for each session (the possible drama and art activities can be found in appendix 11).

Sessio n	phase	Guide and therapy goals
1	The egg	<p>The first session clearly distinguishes from the following sessions. Safety and introduction to the therapy room, the therapist and group members stand in the focus. The new situation, new people and new impressions can mean stress for the child, that's why it is important to be well prepared and to offer a clear structure to the client.</p> <p>For this purpose, the therapy room is prepared in advance. This means - relating to art- and drama therapy – that the table is set, chairs are prepared, windows are opened and everything is cleaned up. During the first session, the children get a few minutes time to discover the therapy room.</p>
2:	The egg	<p>The traumatized child experiences a safe and protected therapy room and starts to build trust and confidence. In the second session, the children already know what to expect, so they experience less stress. It is still the aim to create a shelter and safe place for the clients by preparing a structured room and set everything up beforehand. Above all, in this stage it is very important to put the focus on building trust between client and therapist as well as between the members of the therapy group.</p>
3:	hatching	<p>The child feels safe and starts to open up to the therapist and (if present) to the group. The child is confronted with its personal issues. This session is about searching for and finding the personal problems of the child. With the help of the therapist, children fill out the questionnaires by which the personal issues become clear and the client gets the chance to tell his/her story. The therapist decides if the trust within the group is already big enough to fill out the questionnaires in the presence of the whole group or one-on-one with the therapist. Now, the child is confronted with its own feelings, behavior, physical and cognitive condition.</p>
4 -5	Eating and growing	<p>The client works on the goals, formulated during the third session. Depending on these goals, the therapist offers suitable medium- linked activities. The child learns, experiences, feels, grows, develops and is social. The child is strong in its own resources.</p>
6 -7	cocoon	<p>Session 6 and 7 are about reflecting back on to what's learned in session 4 and 5. The child will gain insight on its own process of development. A review takes place on how the child came into therapy and which learning gains and changes the child has made. The child gets an insight on its personal development, progress and growth. If a child feels safe enough, a trauma-exposition can take place at this stage of therapy.</p>
8	Butterfly	<p>The clients have their farewell from therapy and celebrate the advantages they made in that time. The second questionnaire is completed with the help of the therapist. Afterwards, it is time for a farewell `celebration` and the therapist can decide if the child needs further treatment in the next term.</p>

2. Theoretical framework

To get a better understanding of what this research is based on and also what kind of problems the participants are suffering from, it is necessary to collect relevant information of existing theories. The theoretical framework includes definitions and theories about

- ⇒ Townships
- ⇒ Trauma and the symptoms on children
- ⇒ Types of trauma
- ⇒ Process model of psychological traumatization
- ⇒ Trauma and culture
- ⇒ The BAP method

2.1.1 Township

The biggest part of the black and coloured South African population lives in so called Townships, informal settlements at the outskirts of bigger cities like Cape Town, Johannesburg or Durban. They arose in the time of the 'Apartheid' from 1948 to 1994, when the white government decided they had to separate the races. This means that black and coloured people were not allowed to live in the city (which was the area of white people) any longer, but had to move to the outskirts of the city, where the townships were built. Apartheid was a time of oppression and violation of human rights of the black and colored population. Even after the end of Apartheid in 1994, townships kept existing and the marks of this time are still clearly to see until today. People live in shacks, huts of corrugated tin and don't have a lot of money. Due to high poverty and a lack of future prospects, a high rate of crime and violence exist in this area. Also, diseases like HIV and tuberculosis are pervasive in South Africa's Townships. (Pawlak & Schott, 2012) Since 1994 the composition of the population and problems in the townships are changing as there are now refugees from all parts of South Africa and other African nations dwelling in townships and informal settlements. Vrygrond, which means "free ground", was not a Township that was established during apartheid. Vrygrond was an informal settlement until Jonathan Schrire came. Jonathan Schrire formed the Vrygrond community development trust, which replaced the shacks with 1600 brick houses. The population composition and problems in the townships are constantly changing since 1994, there are now looking for refugees of all kinds from South Africa and other African nations dwelling in townships and informal settlements. The legal meaning of the term "township" in South Africa differs from the popular usage, and has a precise legal meaning without any racial connotations. The term is used in land titles and townships are subdivided into stands. Township can also mean a designated area or district. For instance "Industrial Township" has been used in reference to an industrial area, e.g. "Westmead Industrial Township", in Pinetown, South Africa. Despite their origins in apartheid South Africa, today the terms township, location and informal settlements are not used pejoratively.



Figure 1: Township Vrygrond

2.1. 2 Trauma and the symptoms of children

The participants of the research are 16 children between the ages of 7 and 12. On the cognitive level, the children are now, according to the Swiss developmental psychologist Jean Piaget (1972), in the *concrete operational stage*. That means that the children can conserve and think logically from this age on. They are also able to understand different aspects of a situation. (Feldman, 2009)

Just as adults, children are exposed to traumatic situations and events, but their symptoms partly differ from adults' symptoms. Post-traumatic disorders (PTSD) with children attract more and more attention, because the negative impact on biological, psychological and social development is clearly evident.

The neuropsychology names the first four years of life as the most important time for the development of the brain and the nerves. In this period of time, the brain develops more than its half. This stands in contrast to the body, which is still developing in the first 20 years (baby, toddler, adolescence, development on cognitive, social and physical level). This means, that in a child's first four years of life, important connections in the brain are made. Here it is very important for the development of the child and the brain, to imitate and to collect experiences. From the neuropsychological approach, one is looking at the development of the brain, during the treatment of children. From this knowledge, the development of the brain could eventually get caught up. (Perry & Szalaviz, 2013).

Possible symptoms of children after a trauma can be sadness, insomnia, eating disorders, change of social behavior (aggressions, retreat), anxieties, problems with concentration, nightmares and flashbacks (Eckardt, 2006).

Ploog (2012) adds that in addition, crying, urinating in the pants, loss of control, problems with breathing and anger can appear. Schäfer, Sachsse & Rüther (2009) additionally describe symptoms like guilt feelings, hyper arousal and physical reactions, like pain.

Dangendorf (2007) describes 'that this emotional shock is leading either to avoidance of emotions, or to complete inner emptiness or to an unloading of emotions in the form of aggressions' (p. 47). The school psychological counseling service Düsseldorf (2010) divides symptoms mentioned above into four fields/levels: the field of behavior, the field of emotions, the field of cognition and thoughts and the field of physical condition.

In the field of emotional condition there are the following consequences of traumatization for children: Children feel scared, sad, helpless, lonely and guilty or worried. In the field of physical condition, children feel tired quickly, have less energy, tremble or show more or less appetite than usual. Relating to the field of behavior, traumatization is expressed through insomnia, nightmares, isolation and jumpiness. On the cognitive field there is an occurrence of problems with concentration, flashbacks, loss of control and confusion.

2.1.3 Types of trauma

Leonore Terr (1991), trauma researcher and psychology professor at the University of California, makes a differentiation between so called type 1 and type 2 traumas. Terr justifies such a differentiation with her experience in treatment of traumatized children.

Type 1

Type – 1 – trauma is described as a single, sudden, intense and shocking event within a short period of time, with a clear start and ending. This type is also called "shock trauma".

Type 2

Type 2 trauma develops from repeated, repeating or continuing traumatic events.

2.1.4 Process model of psychological traumatization

Fischer & Riedesser (2009) describe a trauma as a process that is expressed in their process model of traumatization. By establishing a connection between the psychological phenomena and the person's background and life story they address, among others, Freud's definition of a trauma.

According to Freud (1896), a traumatic experience is the result of continuous stimuli penetrating the psyche which leads to numerous intrapsychological activities. This process leads to a decreasing ability of resistance the I and the state of security cannot be achieved again. A traumatic state of psychological helplessness is created as well as a feeling of lack of control and a feeling of vulnerability for other stimuli. If this state continuous over a certain period of time it is a pathological state in itself.

The respective phases of this model are connected dynamically and happen parallel to each other or cross each other. The three phases are categorized as follows:

- traumatic situation
- traumatic or post-expository reaction
- traumatic process

The situation, reaction and process refer to each other internally and create three different moments of one single dynamic development.

2.1.5 Trauma and culture

The culture plays a role on how a person can absorb and digest a negative experience or trauma. The positive influence of a culture is pointed out in studies, measuring social integration. The posttraumatic stress disorder is a Western psychiatric diagnosis (Aarts & Visser, 2007).

A trauma needs to be seen in its whole context. To recognize the full range of experiences that may have an impact and influence on people's lives, it is important to understand the social environment, the culture and subcultures they live in. An experience that can traumatize people in one culture is probably a rather 'normal' event in another culture.

The aftermath of a traumatic experience always depends on a person's individual temperament, history, personal circumstances and the introspective influence of the event. This means that the impact of the trauma is always related to the meaning the person ascribes to it. Davies, Krippner & Pitchford (2012) explain: *'Several factors may predispose one individual to being more susceptible to emotional and psychological stress than another. These includes traumas such as living in unstable or unsafe environments, separation from a parent, serious illness, intrusive medical procedures, domestic violence, emotional neglect, bullying , and sexual , physical or verbal abuse.'* (p.5)

2.1.6 BAP – Method

In various publications as for example: (Dangendorf, 2007) and (Lackner, 2005), you may find that trauma treatment contains three phases. The stabilization phase, trauma confrontation and integration. In the case of the BAP - Method, these three phases also stand in the center but the focus is more on the stabilization stage and integration than on trauma confrontation. In the ideal case - like Angela Katschke is saying - the children can go through the whole process in the treatment of 8 sessions, but in the context of the township environment and the chance of re – traumatization, we are fortunate if we enable a child to go through all the stages in such a short time. This again also depends on the severity of the trauma.

It may even happen that a child is still in the stabilization phase after 8 sessions. In this case, the child is given a second treatment during the next school term. Even though the child has not achieved these three stages during the eight sessions, the last session is the “butterfly - session” in any event, because it’s important to say goodbye and have a good ending, so the child is in safe frame until the end of treatment. Furthermore, Katschke (personal communication, April 2013) says:

“Because of the living conditions of the children in a township environment, it is not possible to use and apply the methods of trauma – treatment like they are used in a Western context. The chance of re-traumatization here is much higher.”

The 3- phase - model

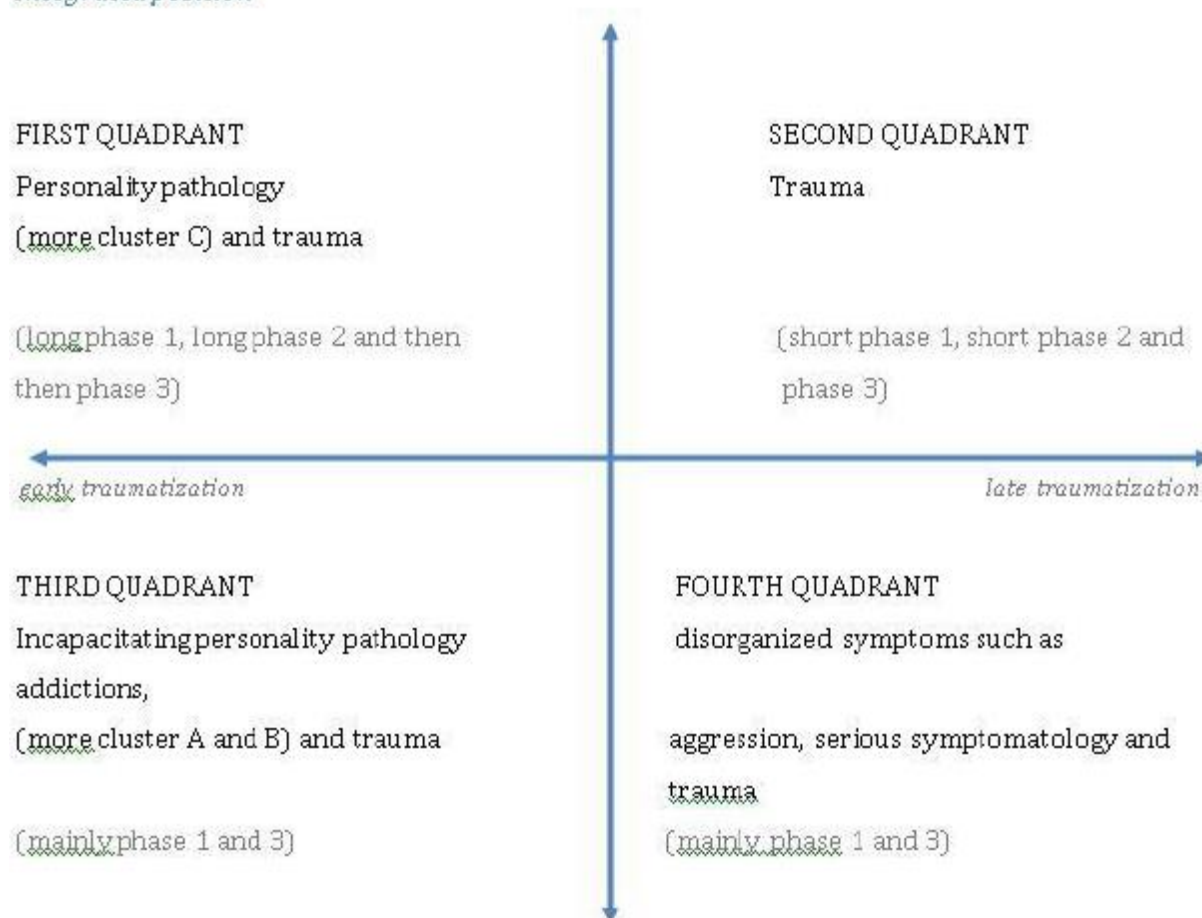
The 3 – phase – model, as it is written by Herman (1992) and Van der Hart and Nijenhuis (2003, 2007), gives a reasonable order and structure for the treatment of trauma. The structure of the BAP-method can be assigned to this model.

The model contains 3 phases (Herman, 1992; Van der Hart & Nijenhuis, 2007). According to this model, interventions in the treatment of trauma are sequent directed to stabilization of functioning, reduction of symptoms, treatment of traumatic memory, personal integration and future perspectives.

3 phases of trauma treatment

1. Stabilization of functioning and reduction of symptoms
2. Treatment of traumatic memory
3. Personal integration and future perspectives

Integrated position



Separated position

Table 2: Manifestations and treatment possibilities of forms of complex trauma (Mooren & Stoefsel, 2010)

The Bap method can be placed in the manifestations and treatment possibilities of forms of complex trauma, as it is described by Mooren & Stoefsel (2010).

As can be seen in table 1, BAP-clients can be placed in the third quadrant, which shows traumatization before the end of adolescence with a separated position. Clients in the third quadrant have the most complex problem and thereby the most adverse treatment possibilities. This results from the combination of traumatization in the early phase of life and a poor integrated position. Clients in the third quadrant have a bad integrated position in social life, which means stabilizing interventions in phase 1 will take a lot of time and attention in the treatment. Often there are no more possibilities than phase 1 – interventions and not enough stabilization can be reached to move on to phase 2 of the treatment. With enough stabilization, the treatment would move on to phase 3, which often needs to be stretched in a low frequency to prevent a relapse. The phases in the treatment with the BAP- method also contain these 3 phases and focus more on phase 1 and phase 3. Treatment of the traumatic memory (phase 2) only happens if the client himself decides to express the traumatic event and will never be forced during the treatment (A. Katschke, personal communication, April 2013).

That is why Angela Katschke is focused on a safe environment and the trustful relationship between therapist and client. The children need stability before they can work on the individual healing process.

Katschke follows Rudolf Steiner's anthroposophic idea of man. In the anthroposophy, the essence of the human being is separated into four essential bodies.

1. The physical body
2. The etheric body
3. The astral body
4. The I (ego)

Katschke is convinced that during a trauma, these four bodies are falling apart and need to get reconnected during the therapy. In a workshop (2013) about trauma, she illustrated this separation with the help of the children's book 'Schreimutter' from Jutta Bauer (2000). In this story, a small penguin was shouted at by his mother, which made his body fall apart. His head flew into the space, his torso into the sea, his wings disappeared in the jungle, the beak landed on the mountains and the bum in the city. For Katschke, it is very important to collect these different parts and form them back into one. With the BAP-method, the therapist is doing this by offering drama- and art activities, which help strengthen the client's resources. In this context, there is a creative therapeutic triangle (see appendix X), which pictures the different connections between therapist, client and the medium. At the beginning of the treatment with the BAP-method, the relationship between the therapist and client is central and strengthened by the medium. In the later course of the therapy, the medium and the client get a closer connection. The drama- and art activities are not defined, they are chosen by the therapist, depending on session, client group, size of the group and age of the clients (possible drama- and art methods in the appendix). For Katschke, it is very important that the healing process is set by the child himself. This implies that also the last session of the BAP-method – the butterfly session – does not mean there has been a complete integration of trauma. Katschke attaches a great importance to the safe and relaxing environment of the therapy. It is also important that the client is central and the therapist meets his needs. For Katschke, it is not a problem if a child is just sleeping during a session, because there has been a terrible day at home and the child couldn't sleep in the night. Katschke's method can be compared to the Rogerian perspective, where the client is in the center and the therapist meets his needs. The BAP – method doesn't work psychoanalytically, but in the here and now, as it is done in humanism. (Rigter, 2008) Looking much further, there can even be found some elements of Buddhism in this method. Strength lies in peace is an important statement here (Gaent, 2002). The child doesn't get any pressure or stress; it's going just as far into the therapeutic process as it is possible. Katschke wants to provide a safe and structured setting in therapy, which the children don't have at home. Here, she attaches importance to rituals at the beginning and end of each session to create safety through structure.

3. Research design

In the following section, the research design of the thesis is described. The first part states the research objective and elaborates on the research concept, consisting of the research participants and the therapeutic program. Furthermore, the second part contains the design of the field research, focusing on the research strategy, the method of data collection and the method of data analysis.

In this third chapter, the research structure of the elaborated effect evaluation is described.

3.1. Objective

The super ordinate target of this research is to find out which effect the BAP – method has on traumatized children living in a South African township, in the fields of emotion, thinking, body and behavior. The point is to find out whether the client's condition has developed positively, negatively or not at all by using result measure (Migchelbrink, 2010, p. 168). This is tested on all the four fields by using questionnaires.

The statements about the effects before and after following the BAP-method are not based on causality, but on plausibility. The basic structure in this model of effect measures the question: Do the clients improve on their level of emotion, thinking, body and behavior by treating them with the BAP-method?

3.2. Research concept

The participants:

The 16 clients (6-12 years) followed the BAP – method as described in section 2.1.3. Eight clients followed the BAP-method drama (D) program, the other 8 clients followed the BAP-method art (A) program. 14 clients followed the BAP-method in a group setting and two of them individually. All of the 16 clients are students from the Capricorn Primary school in Vrygrond and also live in this township. All of them are more or less traumatized through different traumatic events in their life's. Every participant had to fill out two questionnaires. The first questionnaire was filled out during the third session of the BAP- method and the second one after following the program. Also, the class teacher of every client had to fill out two questionnaires: the first questionnaire before the child started the therapy and the second one after the child had followed the BAP – method. Listed below is a description of the 16 clients that took part in the BAP-method therapy program.

Client	Sex	Age	Background	Drama	Art	Group	Individual
AD	F	11	Younger brother with cancer, aggressive, low IQ, neglected	x		x	
BD	F	11	Sexual abuse, low IQ,, isolated	x		x	
CD	F	11	Aggressive, low IQ	x		x	
DD	M	8	Mother died, lives with grandmother	x		x	
ED	M	8	Hectic, stutterer	x		x	
FD	M	8	Apathetic, aggressive	x			
GD	M	11	Aggressive, brother died	x			x
HD	M	11	Sexual abuse, mother tried to kill client, identity problems	x			x

AA		9	ADHD, on Ritalin, only child		x	X	
BA		10	Withdrawn		x	x	
CA		11	Refugee from Uganda, saw father being shot to death		X	x	
DA		10	Domestic violence		X	X	
EA		12	Low IQ		x	x	
FA		10	Blind on one eye, neglected		x	X	
GA		11	Low IQ		x	X	
HA		9	Aggressive, domestic violence		x	x	

Table 1: Overview of participants

3.3. Methods of data collection

In this quantitative research, *questionnaires* were used to answer the research questions. Additionally, a *desk research* has been done to support and establish decisions and definitions. With the questionnaires, a structured and organized way of questioning the participating clients is created. The general framework for the questionnaires is that every participant gets the same conditions for filling out the questionnaires. This means, the clients get the exact same questions and answer possibilities, the questions are put in a logical order and are well-defined.

In total, the researchers created four questionnaires. Two questionnaires were created for the active participants, the clients. Questionnaire 1 is completed in the third therapy session; questionnaire 2 is filled out after finishing the BAP-method therapy program. Additionally, two questionnaires for the clients' class teachers were created to get a more objective picture of the clients' development. Questionnaire 1 is completed, when the child started therapy, questionnaire 2 is filled out after the child had followed the program. The four questionnaires are all arranged in four sub-topics related to the symptoms of a trauma of a child and symptoms of PTSD (American Psychiatric Association, 2013). Each sub-topic contains a specified number of questions and 4 answer options which contain:

1=never; 2 = sometimes; 3 = often; 4 = always

Figure 3: answer options

The questionnaires for the children contain simple and child-friendly questions, while the questionnaires for the teacher only imply symptoms in one word with the same answer possibilities. Both children and teachers have to decide how often a feeling or a symptom occurs according to them. Clients have to answer more questions than teachers, because some symptoms can only be perceived by the traumatized person himself/herself. Teachers can only answer questions about what they can observe during class.

Emotion level	Never	Sometimes	Often	Always
Sadness				
Anxiety				
Helplessness				
Anger				
Inactivity				

Figure 4: Questionnaire 1 & 2 – teacher

Emotion level	Never	Sometimes	Often	Always
Are you sad?				
Do you feel guilty?				
Do you feel scared?				
Do you feel lonely?				
Do you feel helpless?				
Do you feel angry				
Do you feel dull and sluggish?				
Do you have worries?				

Figure 5: Questionnaire 1 & 2 - child

Each answer includes a specified number. *Never* counts as 1 point, *sometimes* counts as 2 points, *often* counts as 3 points and *always* counts as 4 points. This creates a scale that helps to find out the development of the client's symptoms from the beginning of the program until after the therapy. It makes it possible to find out how often a specified behavior, symptom or emotion appeared before the therapy and how often has occurred after following the BAP – Method. Each sub-topic has a maximum and a minimum score.

For example: Scale x (see figure 5) includes 5 questions, the highest scoring answer is "always", which counts as 4 points as described. The highest score on the emotional section would be a rating of 5 times "always" (teacher). The maximum score is calculated as follows: $5 \times 4 = 20$. So the maximum score would be 20. The lowest score is reached if all 5 questions are answered with never (1 point on the scale). The minimum score is calculated as followed: $5 \times 1 = 5$ points. So the minimum score would be 5. The higher the total result, the more frequent the client's trauma-symptoms are.

If the score from questionnaire 2 is lower than the score from questionnaire 1, it shows positive development. If the result score is higher in the second questionnaire than in the first one, it shows a negative development.

The researchers used desk research to collect information on theories about trauma to create useful questionnaires based on symptoms of trauma.

3.4 Methods of data analysis

The methods the authors used to analyze the quantitative data are *automated processing* and statistical techniques. By using the 'spreadsheetprogram' (Migchelbrink, 2010) and Microsoft Excel, they could insert the quantitative data into SPSS and process them with diagrams. The researchers calculated the average numbers of all given answers for the 4 sections to give a clearer overview on the effect of the method. The numbers are represented in multiple scales and diagrams, which illustrate and demonstrate the effect of the BAP-method. The researchers used SPSS for the statistic data analyses and used *t-value* for this control sample. In this research, they compared in each case two group means (child *while and after* therapy and teacher *before and after*) and used for this purpose the *statistical paired t – test*. The authors compared both groups with each other and decided whether a difference between both groups (before/after) is significant or a random variation. If a connection is significant or not is shown in the table as *p*. *P* stands for probability. If the value is $p < 0.05$ then there is a significant difference, which means the value is too significant to count as random variation.

We calculated the average numbers of all given answers for the 4 sections, to give a clearer overview on the effect of the method. The numbers are represented in multiple scales and diagrams, which illustrate and demonstrate the effect of the BAP-method.

4. Results

In the following chapter the results of the research are presented in diagrams, showing the scored means, which are calculated with SPSS. As explanation of the data an overview has been made of the possible maximum and minimum score on each level as described in 3.3.2.

The highest score per child is reached when every question is answered with always = 4. The lowest score per child is reached when every question is answered with never = 1.

Level	Teacher questionnaire		Children questionnaire	
	max mean	Min mean	Max mean	Minimum mean
Emotional level	20points	5 points	32 points	8 points
Thinking level	16 points	4 points	24points	6points
Body level	16points	4 points	32points	8 points
Behavior level	36 points	9 points	40points	10points
All four level together	88 points	22points	128 points	32points

Table 2: The maximum and minimum mean on each level.

4.1 Emotional level

Does the BAP - Method have an effect on the development of the emotional condition of a traumatized child that grows up in a South African township after 8 weeks of therapy?

To test whether the 16 children change on the emotional level, the eight items (Q1 – Q8) of the child questionnaire and the five items of the teacher questionnaire (Q1-Q5) measuring the emotional level, are summed up for both measurement moments (*while and after* therapy within the child questionnaire and *before and after* within the teacher questionnaire). Applying a paired sampled T-test the basis hypothesis is tested of no change on the emotional level. We tested at a significance level of 0.05. This implies that a test result with $p < 0.05$ yields a significant improvement of the emotional level.

Paired t – test				
Results emotional level				
Pair 1			Pair 2	
	Child while	Child after	Teacher before	Teacher after
Mean	17,13	13,38	11,93	10,43
Sig.	P = .000		P = .053	

Table 3: Paired t –test emotional level

The results of the paired t-test show, that the mean for the 16 children on the emotional level during therapy is 17.13 points and after the treatment 13.38 points. This decrease of 3.75 points is statistically significant ($p = .000$) (see appendix 1)

According to the teachers answers, the mean emotional level of the 16 children before therapy was 11.93 points and after therapy 10,43 points. This decrease of 1.50 points was statistically not significant ($p = .053$) (see appendix 1).

The values of the t-test (questionnaire child and questionnaire teacher) are not comparable, due to the different number of questions and will first be reduced to a common denominator. This makes the values comparable, to find the exact effect on the emotional level.

To reduce the values to a common denominator, the results are divided by the number of questions (8 or 5).

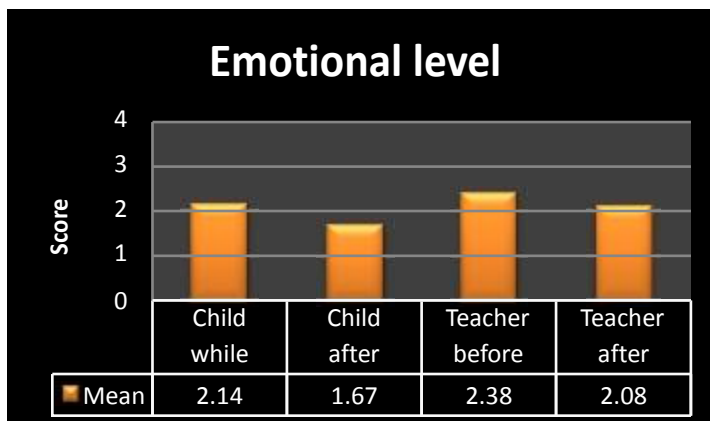


Diagram 1: Results emotional level

For the 16 children the mean value on the emotional level during therapy is 2.14 and after the treatment it is 1,67 points.

According to the teachers answers, the mean value on the emotional level of the 16 children before therapy is 2,28 points and after therapy 2.08 points.

4.2 Thinking level

Does the BAP - Method have an effect on the development of the cognitive level of a traumatized child, growing up in a South African township, after 8 weeks of therapy?

To test whether the 16 children change on the thinking level, the six items within the child questionnaire (Q9 – Q14) and the four items within the teacher questionnaires (Q6 – Q9) suppose to measure the thinking level, are summed up for both measurement moments (*while and after* therapy within the child questionnaires and *before and after* within the teacher questionnaires). Applying a paired sampled T-test the basis hypothesis is tested of no change on thinking level. We tested at a significance level of 0.05. This implies that a test result with $p < 0.05$ yields a significant improvement of the thinking level.

Paired t – test Results thinking level				
Pair 1			Pair 2	
	Child while	Child after	Teacher before	Teacher after
Mean	14,18	11,31	10,25	8,31
Sig.	P = .000		P = .005	

Table 4: Paired t-test thinking level

The results of the paired t-test show (see appendix) the mean value of the children on the thinking level during therapy is 14,18 points and after the treatment 11,31 points. This decrease of 2,78 points is statistically significant ($p = .000$) (see appendix 2)

According to the teachers answers, the mean value on the thinking level of the 16 children before therapy was 10,25 points and after therapy 8,31 points. This decrease of 1.93points was statistically significant. ($p = .005$) (see appendix 2)

The values of the t-test (questionnaire child and questionnaire teacher) are not comparable, due to the different number of questions and will first be reduced to a common denominator. This makes the values comparable, to find the exact effect on the emotional level.

To reduce the values to a common denominator, the results are divided by the number of questions (6 or 4).

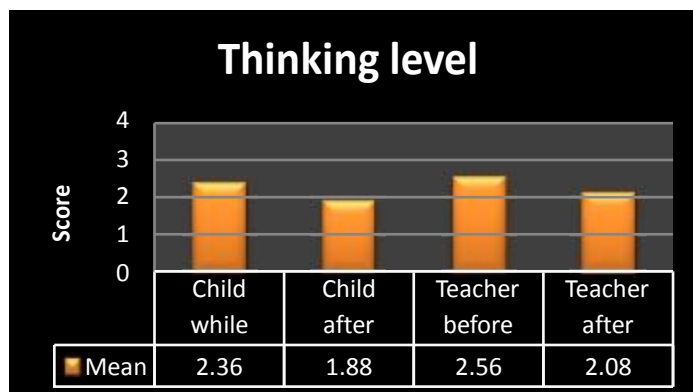


Diagram 2: Results thinking level

For the 16 children the mean value on the thinking level during therapy is 2.36 and after treatment it is 1,88 points.

According to the teachers answers, the mean emotional level of the 16 children before therapy was 2,56 points and after therapy 2.08 points.

4.3 Body level

Does the BAP - Method have impact on the development of the physical conditions of a traumatized child, growing up in a South African township, after 8 weeks of therapy?

To test whether the 16 children change on the body level, the eight items within the child questionnaire (Q15 – Q22) and the four items within the teacher questionnaire (Q10 – Q13)

supposed to measure the body level, are summed up for both measurement moments (*while and after therapy* within the child questionnaires and *before and after* within the teacher questionnaires). Applying a paired sampled T-test the basis hypothesis is tested of no change on body level. We tested at a significance level of 0.05. This implies that a test result with $p < 0.05$ yields a significant improvement of the body level.

Paired t – test Results body level				
Pair 1			Pair 2	
	Child while	Child after	Teacher before	Teacher after
Mean	16,12	13,06	7,37	5,62
Sig.	P = .000		P = .000	

Table 5: Paired t-test body level

The results of the paired t-test show, that the mean value for the 16 children on the body level during therapy is 16,12 points and after the treatment 13.06 points. This decrease of 3.06 points is statistically significant ($p = .000$) (see appendix 3)

According to the teachers answers, the mean on body level level of the 16 children before therapy was 7,37 points and after therapy 5, 62 points. This decrease of 1.75 points was statistically significant ($p = .005$) (see appendix 3).

The values of the t-test (questionnaire child and questionnaire teacher) are not comparable, due to the different number of questions and will first be reduced to a common denominator. This makes the values comparable, to find the exact effect on the emotional level.

To reduce the values to a common denominator, the results are divided by the number of questions (8 or 4).

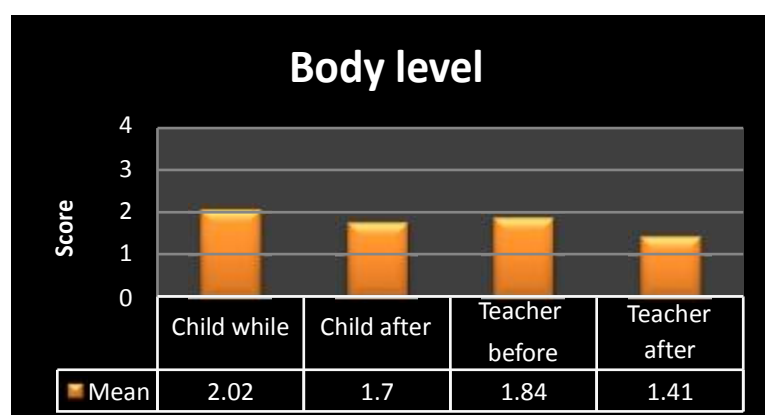


Diagram 3: Results body level

For the 16 children the mean value on the body level during therapy is 2.02 and after treatment it is 1,7 points.

According to the teachers answers, the mean body level of the 16 children before therapy was 1,84 points and after therapy 1,41 points.

4.4 Behavior level

Does the BAP - Method have an impact on the development of the behavior of a traumatized child, growing up in a South African township, after 8 weeks of therapy?

To test whether the 16 children change on the behavior level, the ten items within the child questionnaire (Q23 – Q32) and the nine items within the teacher questionnaires (Q14 – Q22) supposed to measure the behavior level, are summed up for both measurement moments (*while and after* therapy within the child questionnaires and *before and after* within the teacher questionnaires). Applying a paired sampled T-test the basis hypothesis is tested of no change on behavior level. We tested at a significance level of 0.05. This implies that a test result with $p < 0.05$ yields a significant improvement of the body level.

Paired t – test				
Results behavior level				
Pair 1			Pair 2	
	Child while	Child after	Teacher before	Teacher after
Mean	21,31	16,87	19,06	16,37
Sig.	P = .000		P = .001	

Table 6: Paired t- test behavior level

The results of the paired t-test show (see appendix) that the mean value of the children on the behavior level during therapy is 21,31 points and after the treatment 16,87 points. This decrease of 4,43 points is statistically significant ($p = .000$)

According to the teachers answers, the mean value on the behavior level of the 16 children before therapy was 19,06 points and after therapy 16,37 points. This decrease of 2,68 points was statistically significant. ($p = .001$) (see appendix 4)

The values of the t-test (questionnaire child and questionnaire teacher) are not comparable, due to the different number of questions and will first be reduced to a common denominator. This makes the values comparable, to find the exact effect on the emotional level.

To reduce the values to a common denominator, the results are divided by the number of questions (10 or 9).

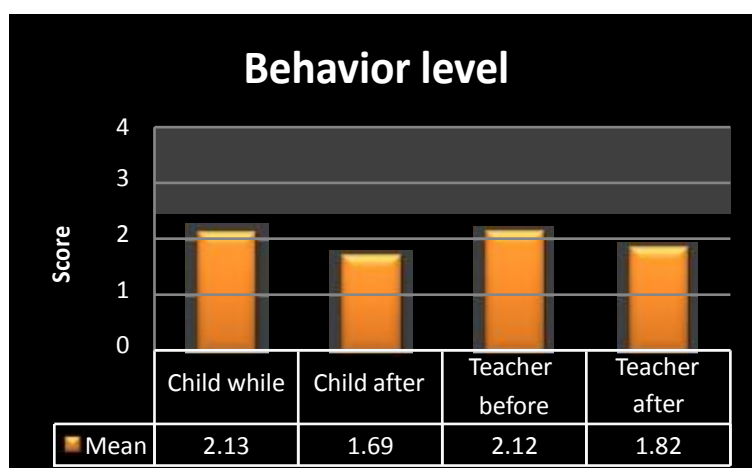


Diagram 4: Results behavior level

For the 16 children the mean value on the behavior level during therapy is 2.13 and after treatment it is 1,69 points.

According to the teachers answers, the mean value of the body level of the 16 children before therapy was 2,12 points and after therapy 1,82 points.

4.5 Total results

To test whether the 16 children change on all four levels, the 32 items within the child questionnaires (Q1 – Q32) and the 22 items within the teacher questionnaires (Q1 – Q22) supposed to measure all four levels, are summed up for both measurement moments (*while and after* therapy within the child questionnaires and *before and after* within the teacher questionnaires). Applying a paired sampled T-test the basis hypothesis is tested of no change on all four levels. We tested at a significance level of 0.05. This implies that a test result with $p < 0.05$ yields a significant improvement on all the four levels together.

Paired t – test				
Total results				
Pair 1			Pair 2	
	Child while	Child after	Teacher before	Teacher after
Mean	68,75	54,62	48,62	40,75
Sig.	P = .000		P = .001	

Table 7: Paired t-test total results

The results of the paired t-test show (see appendix) that the mean value of the children on the behavior level during therapy is 68,75 points and after the treatment 54,62 points. This decrease of 14,12 points is statistically significant ($p = .000$).

According to the teachers answers, the mean value on the behavior level of the 16 children before therapy was 48,62 points and after therapy 40,75 points. This decrease of 7,87 points was statistically significant. ($p = .001$) (see appendix 5)

The values of the t-test (questionnaire child and questionnaire teacher) are not comparable, due to the different number of questions and will first be reduced to a common denominator. This makes the values comparable, to find the exact effect on the emotional level.

To reduce the values to a common denominator, the results are divided by the number of questions (32 or 22).

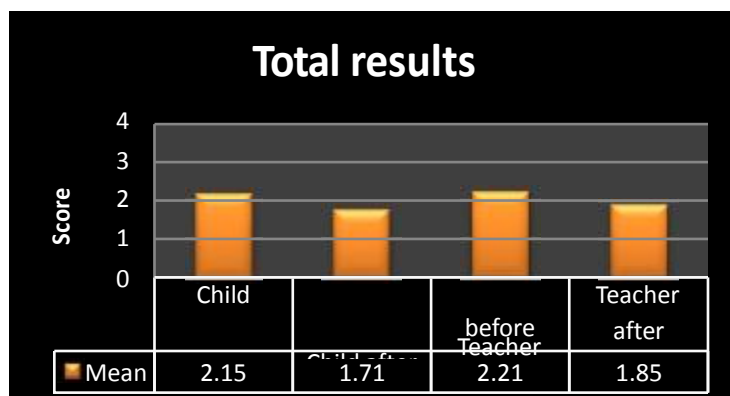


Diagram 5: Total results

For the 16 children the mean value on the behavior level during therapy is 2.15 and after treatment it is 1,71 points.

According to the teachers answers, the mean value on the body level of the 16 children before therapy was 2,21 points and after therapy 1,85 points.

5. Conclusion

The effect on emotional level

The results of the research show a positive development of the children's emotional condition. Both children and teachers see an improvement of the symptoms. This means, symptoms like sadness, anxiety, helplessness, anger and inactivity appear less often or less intense. The results of the children show a higher positive development, than the teachers results do.

The effect on thinking level

The results of the research show a positive development of the children's cognitive condition. Both children and teachers see an improvement of the symptoms. This means, symptoms like concentration problems, confusion, loss of control, flashbacks and blackouts appear less often or less intense. The results of the children show a higher positive development, than the teachers results do.

The effect on body level

The results of the research show a positive development of the children's physical condition. Both children and teachers see an improvement of the symptoms. This means, symptoms like energy shortfall, loss of appetite, tiredness, pain, heart racing and tremble appear less often or less intense. The results of the children show a higher positive development, than the teachers results do.

The effect on behavior level

The results of the research show a positive development of the children's behavior. Both children and teachers see an improvement of the symptoms. This means, symptoms like sleeping problems, nightmares, social retreat, crying, apathy, lethargy, impulsivity and aggressiveness appear less often or less intense. The results of the children show a higher positive development, than the teachers results do.

What effect has the BAP method on behavior , emotional state , physical condition and the cognitive state of traumatized children , growing up in a South African township?

The results of the research show a mean positive development of the children's condition on all four levels. The positive effect means, that trauma symptoms are reduced on average after 8 weeks of therapy. Unlike the chance of re-traumatization exists, the BAP- method is successful for traumatized children in the context of a South African township. The lowest positive development can be seen in the physical condition. It is assumed that the structure and the trustful relationship between client and therapist, creates a safe framework for the child to strengthen its resources and supports the healing process. The safe setting of the therapy offers traumatized children with a separated and unstable position at home, the chance and place to develop positively. This leads to the conclusion, that the BAP- method does have a positive effect on behavior, emotional state, physical condition and the cognitive state of traumatized children, growing up in a South African township.

Discussion

While working on this research and analyzing the results, some questions and discussion points came up, which can be useful for further research of future students. While working on the questionnaires, the researchers first planned to let the childrens' parents fill out the questionnaires, too, because parents are normally the ones who know their children best and should be able to see the child's development and change more clearly than any teacher can. Quickly, the researchers found out that it's very difficult to get in contact with the parents, who did not show a lot of interest, wouldn't show up to fill out a questionnaire and it would have been too dangerous for the authors to visit them at home. So how can we involve parents better in the research and – even more important- their children's treatment, make them understand the importance of therapy and make them support their children more in the future? Parents and family are also the key to re-traumatization, which happens very often to the children of Vrygrond. What can be changed to avoid re-traumatization as much as possible? How can children be prepared for a re-traumatization after therapy, so they know what to do and handle their trauma better? Another discussion point is the validation of the trauma symptoms. Isn't it a positive development, when a child that was in a state of total retreat at the beginning of the treatment, is able to show anger towards the end of therapy, even though anger is actually a symptom of trauma? One child that participated was suffering from ADHD and was under the influence of Ritalin in the second half of the therapy, which probably also had an influence on the results. A further discussion point is the question: Is the questionnaire valid? Even though we created very simple questionnaires, it was very hard for the children to understand the questions without any further explanation. What does 'sometimes', often, always, never' mean? These answer possibilities can be seen as very subjective, which can cause imprecise results. Some of the participating clients of the BAP – Method have a very low IQ, which could have an influence on how they answered the questions of the questionnaire. Even though we kept the questionnaires very simple, the children were probably not always able to understand everything or assess themselves, because of their lack of intelligence. We've got the impression that the teachers also struggled with the terms of ,sometimes 'and ,often'. Maybe another measuring method should be used with this clients, a cognitive measuring method like the questionnaires is probably not appropriate in this case. Also the differences of the effect of the BAP-method between boys and girls and drama and art were not tested in this research. This could be analyzed in future research. Another question that came up, was the continuance of the BAP- method. In which phase does a second treatment start? Another therapy program, based on the BAP- method could be developed in the future. Finally, it's very important to confirm and support the BAP-method with literature and references to make it a specified and valid art therapeutic method, which then could be used by therapists worldwide. Due to the fact that this research is about the *effect* of the BAP-method, we could not focus on the content of this method as much as it's actually necessary.

Recommendations

- Psycho education for parents and teachers
- Research on an appropriate measuring method
- Research on differences between art and drama
- Confirm and support the BAP- method
- Research on further development of the BAP- method

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Appendix 1

Results emotional level (t-test)

Paired Samples Statistics

		Mean	N	Std. Deviation	Std. Error Mean
Pair 1	emotionalchildafter	13.3750	16	2.47319	.61830
	emotionalchildwhile	17.1250	16	2.70493	.67623
Pair 2	emotionalteacherafter	10.4375	16	2.25000	.56250
	emotionalteacherbefore	11.9375	16	2.29401	.57350

Paired Samples Correlations

		N	Correlation	Sig.
Pair 1	emotionalchildafter & emotionalchildwhile	16	.780	.000
	emotionalteacherafter & emotionalteacherbefore	16	.212	.430

Paired Samples Test

		Paired Differences					t	df	Sig. (2-tailed)
		Mean	Std. Deviation	Std. Error Mean	95% Confidence Interval of the Difference				
					Lower	Upper			
Pair 1	emotionalchildafter - emotionalchildwhile	-3.75	1.73205	.43301	-4.67294	-2.82706	-8.660	15	.000
Pair 2	emotionalteacherafter - emotionalteacherbefore	-1.50	2.85190	.71297	-3.01967	.01967	-2.104	15	.053

Appendix 2

Results - thinking level (t-test)

Paired Samples Statistics

		Mean	N	Std. Deviation	Std. Error Mean
Pair 1	thinkingchildafter	11.3125	16	1.53704	.38426
	thinkingchildwhile	14.1875	16	2.61327	.65332
Pair 2	thinkingteacherafter	8.3125	16	1.62147	.40537
	thinkingteacherbefore	10.2500	16	2.51661	.62915

Paired Samples Correlations

		N	Correlation	Sig.
Pair 1	thinkingchildafter & thinkingchildwhile	16	.814	.000
	thinkingteacherafter & thinkingteacherbefore	16	.437	.091

Paired Samples Test

		Paired Differences					t	df	Sig. (2-tailed)
		Mean	Std. Deviation	Std. Error Mean	95% Confidence Interval of the Difference				
					Lower	Upper			
Pair 1	thinkingchildafter - thinkingchildwhile	-2.87	1.62788	.40697	-3.74244	-2.00756	-7.064	15	.000
Pair 2	thinkingteacherafter - thinkingteacherbefore	-1.93	2.32289	.58072	-3.17528	-.69972	-3.336	15	.005

Appendix 3

Results - body level (t – test)

		Mean	N	Std. Deviation	Std. Error Mean
Pair 1	bodychildafter	13.0625	16	2.54214	.63554
	bodychildwhile	16.1250	16	3.18067	.79517
Pair 2	bodyteacherafter	5.6250	16	1.31022	.32755
	bodyteacherbefore	7.3750	16	2.06155	.51539

		N	Correlation	Sig.
Pair 1	bodychildafter & bodychildwhile	16	.914	.000
	bodyteacherafter & bodyteacherbefore	16	.747	.001

Paired Sample t test

		Paired Differences					t	df	Sig. (2-tailed)
		Mean	Std. Deviation	Std. Error Mean	95% Confidence Interval of the Difference				
					Lower	Upper			
Pair 1	bodychildafter - bodychildwhile	-3.06	1.34009	.33502	-3.77658	-2.34842	-9.141	15	.000
Pair 2	bodyteacherafter - bodyteacherbefore	-1.75	1.39044	.34761	-2.49092	-1.00908	-5.034	15	.000

Appendix 4

Results - behavior level (t-test)

		Mean	N	Std. Deviation	Std. Error Mean
Pair 1	behaviorchildafter	16.8750	16	2.65518	.66380
	behaviorchildwhile	21.3125	16	3.51603	.87901
Pair 2	behaviorteacherafter	16.3750	16	3.68556	.92139
	behaviorteacherbefore	19.0625	16	4.18678	1.04670

Paired sample statistic

		N	Correlation	Sig.
Pair 1	behaviorchildafter & behaviorchildwhile	16	.883	.000
	behaviorteacherafter & behaviorteacherbefore	16	.798	.000

Paired Samples Correlations

		Paired Differences					t	df	Sig. (2-tailed)
		Mean	Std. Deviation	Std. Error Mean	95% Confidence Interval of the Difference				
					Lower	Upper			
Pair 1	behaviorchildafter - behaviorchildwhile	-4.43	1.71148	.42787	-5.34948	-3.52552	-10.371	15	.000
Pair 2	behaviorteacherafter - behaviorteacherbefore	-2.68	2.54869	.63717	-4.04560	-1.32940	-4.218	15	.001

Paired Sample T test

Paired Samples Statistics

Appendix 5

Paired Samples Correlations

Paired Samples Test

Total result on all levels (t-test)

Paired Samples Statistics

		Mean	N	Std. Deviation	Std. Error Mean
Pair 1	emotionalchildafter	13.3750	16	2.47319	.61830
	emotionalchildwhile	17.1250	16	2.70493	.67623
Pair 2	thinkingchildafter	11.3125	16	1.53704	.38426
	thinkingchildwhile	14.1875	16	2.61327	.65332
Pair 3	bodychildafter	13.0625	16	2.54214	.63554
	bodychildwhile	16.1250	16	3.18067	.79517
Pair 4	behaviorchildafter	16.8750	16	2.65518	.66380
	behaviorchildwhile	21.3125	16	3.51603	.87901
Pair 5	emotionalteacherafter	10.4375	16	2.25000	.56250
	emotionalteacherbefore	11.9375	16	2.29401	.57350
Pair 6	thinkingteacherafter	8.3125	16	1.62147	.40537
	thinkingteacherbefore	10.2500	16	2.51661	.62915
Pair 7	bodyteacherafter	5.6250	16	1.31022	.32755
	bodyteacherbefore	7.3750	16	2.06155	.51539
Pair 8	behaviorteacherafter	16.3750	16	3.68556	.92139
	behaviorteacherbefore	19.0625	16	4.18678	1.04670

Paired Samples Correlations

		N	Correlation	Sig.
Pair 1	emotionalchildafter & emotionalchildwhile	16	.780	.000
	thinkingchildafter & thinkingchildwhile	16	.814	.000
Pair 3	bodychildafter & bodychildwhile	16	.914	.000
	behaviorchildafter & behaviorchildwhile	16	.883	.000
Pair 5	emotionalteacherafter & emotionalteacherbefore	16	.212	.430
	thinkingteacherafter & thinkingteacherbefore	16	.437	.091
Pair 7	bodyteacherafter & bodyteacherbefore	16	.747	.001
	behaviorteacherafter & behaviorteacherbefore	16	.798	.000

Paired Samples Test

		Paired Differences					t	df	Sig. (2-tailed)
		Mean	Std. Deviation	Std. Error Mean	95% Confidence Interval of the Difference				
					Lower	Upper			
Pair 1	emotionalchildafter - emotionalchildwhile	-3.7500	1.73205	.43301	-4.67294	-2.82706	-8.660	15	.000
Pair 2	thinkingchildafter - thinkingchildwhile	-2.8750	1.62788	.40697	-3.74244	-2.00756	-7.064	15	.000
Pair 3	bodychildafter - bodychildwhile	-3.0625	1.34009	.33502	-3.77658	-2.34842	-9.141	15	.000
Pair 4	behaviorchildafter - behaviorchildwhile	-4.4375	1.71148	.42787	-5.34948	-3.52552	-10.371	15	.000
Pair 5	emotionalteacherafter - emotionalteacherbefore	-1.5000	2.85190	.71297	-3.01967	.01967	-2.104	15	.053
Pair 6	thinkingteacherafter - thinkingteacherbefore	-1.9375	2.32289	.58072	-3.17528	-.69972	-3.336	15	.005
Pair 7	bodyteacherafter - bodyteacherbefore	-1.7500	1.39044	.34761	-2.49092	-1.00908	-5.034	15	.000
Pair 8	behaviorteacherafter - behaviorteacherbefore	-2.6875	2.54869	.63717	-4.04560	-1.32940	-4.218	15	.001

Paired Samples Statistics

		Mean	N	Std. Deviation	Std. Error Mean
Pair 1	totaalchildafter	54.6250	16	7.02258	1.75565
	totaalchildwhile	68.7500	16	9.65056	2.41264
Pair 2	totaalteacherafter	40.7500	16	6.85565	1.71391
	totaalteacherbefore	48.6250	16	8.17211	2.04303

Paired Samples Correlations

		N	Correlation	Sig.
Pair 1	totaalchildafter & totaalchildwhile	16	.922	.000
	totaalteacherafter & totaalteacherbefore	16	.629	.009

Paired Samples Test

		Paired Differences					t	df	Sig. (2-tailed)
		Mean	Std. Deviation	Std. Error Mean	95% Confidence Interval of the Difference				
					Lower	Upper			
Pair 1	totaalchildafter - totaalchildwhile	-14.12	4.17732	1.04433	-16.35094	-11.89906	-13.525	15	.000
Pair 2	totaalteacherafter - totaalteacherbefore	-7.87	6.58154	1.64538	-11.38206	-4.36794	-4.786	15	.000

Appendix 6

Questionnaires 1 & 2 Child

Questionnaires 1 & 2 Teacher

Questionnaire 1 - Child
While the child follows the BAP – Method (session 3)

AD

Name of the child:	[REDACTED]
Sex of the child:	female
Age of the child:	11
Date:	15.5.2013

Emotion level	Never	Sometimes	Often	Always
Are you sad?		X		
Do you feel guilty?	X			
Do you feel scared?		X		
Do you feel lonely?	X			
Do you feel helpless?		X		
Do you feel angry			X	
Do you feel dull and sluggish?	X			
Do you have worries?		X		

Thinking level	Never	Sometimes	Often	Always
Do you mistrust others?	X			
Are you confused?		X		
Do you have problems with concentration?		X		
Do you lose control?	X			
Do you have to remember bad situations all over sudden		X		
Do you forget things?	X			

Body level	Never	Sometimes	Often	Always
Do you feel sick?	X			
Do you have problems to breath?	X			
Do you have little energy?		X		
Do you feel tired?			X	
Do you shake?	X			
Is your heart beating fast?			X	
Do you feel pain in your body?	X			
Are you less hungry?		X		

Behavior level	Never	Sometimes	Often	Always
Do you have problems to sleep?	X			
Do you have nightmares?				X
Do you prefer playing alone?	X			
Do you cry?		X		
Do you feel restless?				X
Do you pee in your bed?	X			
Do you easily get frightened?	X			
Are you acting without thinking?				X
Do you not care about things?	X			
Are you acting out in play?				X

Score:
Never = 1 ; Sometimes = 2 ; Often = 3 ; Always = 4

Questionnaire 1 – Teacher
Before the child will follow the BAP – Method

AD

Name of the teacher:	[REDACTED]
Number of lessons with the child per week:	
Name of the child:	[REDACTED]
Sex of the child:	Female
Age of the child:	11 years
Date:	1.5.2013

Instructions:

Questions are related to the behavior and appearance of the child in class.

Can you observe the following qualities with this child? In which scale? Please fill in:

1 = not correct; 2 = rather not correct; 3 = rather correct; 4 = correct

Emotion level	1	2	3	4
Sadness		✓		
Anxiety		✓		
Helplessness		✓		
Anger			✓	
Inactivity		✓		

Thinking level	1	2	3	4
Confusion		✓		
Concentration problems			✓	
Loss of control			✓	
Blackouts	✓			

Body level	1	2	3	4
Energy shortfall	✓			
Tiredness		✓		
Tremble	✓			
Loss of appetite	✓			

Behavior level	1	2	3	4
Social retreat	✓			
Crying		✓		
Apathy		✓		
Hectic			✓	
Stutter	✓			
Aggressiveness			✓	
Startle			✓	
Impulsivity			✓	
Lethargy		✓		

Signature teacher:



Questionnaire 2- Teacher
After the child followed the BAP – Method

(AD)

Name of the teacher:	[REDACTED]
Number of lessons with the child per week:	
Name of the child:	[REDACTED]
Sex of the child:	female
Age of the child:	02.05.2002
Date:	20.06.2013

Instructions:

Questions are related to the behavior and appearance of the child in class.

Can you observe the following qualities with this child? In which scale? Please fill in:

1 = never; 2 =sometimes; 3=often; 4=always

Emotion level	1	2	3	4
Sadness		✓		
Anxiety		✓		
Helplessness	✓			
Anger		✓		
Inactivity		✓		

Thinking level	1	2	3	4
Confusion		✓		
Concentration problems			✓	
Loss of control			✓	
Blackouts	✓			

Body level	1	2	3	4
Energy shortfall	✓			
Tiredness	✓			
Tremble	✓			
Loss of appetite	✓			

Behavior level	1	2	3	4
Social retreat	✓			
Crying		✓		
Apathy	✓			
Hectic		✓		
Stutter	✓			
Aggressiveness			✓	
Startle	✓			
Impulsivity			✓	
Lethargy		✓		

Signature Teacher:



Questionnaire 1 - Child
While the child follows the BAP – Method (session 3)

(30)

Name of the child:	[REDACTED]
Sex of the child:	female
Age of the child:	12 years
Date:	15.5.2013

Emotion level	Never	Sometimes	Often	Always
Are you sad?		X		
Do you feel guilty?			X	
Do you feel scared?				X
Do you feel lonely?		X		
Do you feel helpless?				X
Do you feel angry		X		
Do you feel dull and sluggish?	X			
Do you have worries?	X			

Thinking level	Never	Sometimes	Often	Always
Do you mistrust others?		X		
Are you confused?		X		
Do you have problems with concentration?	X			
Do you lose control?				X
Do you have to remember bad situations all over sudden			X	
Do you forget things?	X			

Body level	Never	Sometimes	Often	Always
Do you feel sick?				X
Do you have problems to breath?	X			
Do you have little energy?		X		
Do you feel tired?		X		
Do you shake?			X	
Is your heart beating fast?		X		
Do you feel pain in your body?				X
Are you less hungry?		X		

Behavior level	Never	Sometimes	Often	Always
Do you have problems to sleep?				X
Do you have nightmares?				X
Do you prefer playing alone?		X		
Do you cry?		X		
Do you feel restless?		X		
Do you pee in your bed?	X			
Do you easily get frightened?		X		
Are you acting without thinking?		X		
Do you not care about things?				X
Are you acting out in play?				X

Score:

Never = 1 ; Sometimes = 2 ; Often = 3 ; Always = 4

Questionnaire 2 - Child
After the child followed the BAP - Method

(BD)

Name of the child:	[REDACTED]
Sex of the child:	female
Age of the child:	12
Date:	27.6.2013

Emotion level	Never	Sometimes	Often	Always
Are you sad?		X		
Do you feel guilty?	X			
Do you feel scared?			X	
Do you feel lonely?	X			
Do you feel helpless?		X		
Do you feel angry			X	
Do you feel dull and sluggish?	X			
Do you have worries?		X		

Thinking level	Never	Sometimes	Often	Always
Do you mistrust others?		X		
Are you confused?		X		
Do you have problems with concentration?	X			
Do you lose control?		X		
Do you have to remember bad situations all over sudden		X		
Do you forget things?		X		

Body level	Never	Sometimes	Often	Always
Do you feel sick?			X	
Do you have problems to breath?	X			
Do you have little energy?		X		
Do you feel tired?		X		
Do you shake?		X		
Is your heart beating fast?		X		
Do you feel pain in your body?				X
Are you less hungry?		X		

Behavior level	Never	Sometimes	Often	Always
Do you have problems to sleep?			X	
Do you have nightmares?				X
Do you prefer playing alone?	X			
Do you cry?		X		
Do you feel restless?	X			
Do you pee in your bed?	X			
Do you easily get frightened?		X		
Are you acting without thinking?		X		
Do you not care about things?		X		
Are you acting out in play?		X		

Score:
Never = 1 ; Sometimes = 2, Often = 3 ; Always = 4

Questionnaire 1 – Teacher
Before the child will follow the BAP – Method

(BD)

Name of the teacher:	
Number of lessons with the child per week:	
Name of the child:	
Sex of the child:	female
Age of the child:	11 years
Date:	15/2/13

Instructions:

Questions are related to the behavior and appearance of the child in class.
Can you observe the following qualities with this child? In which scale? Please fill in:

1 = never; 2 = sometimes; 3 = often; 4 = always

Emotion level	1	2	3	4
Sadness		x		
Anxiety		x		
Helplessness			x	
Anger	x			
Inactivity		x		

Thinking level	1	2	3	4
Confusion			x	
Concentration problems			x	
Loss of control			x	
Blackouts		x		

Body level	1	2	3	4
Energy shortfall		x		
Tiredness	x			
Tremble	x			
Loss of appetite		x		

Behavior level	1	2	3	4
Social retreat		x		
Crying		x		
Apathy		x		
Hectic	x			
Stutter	x			
Aggressiveness	x			
Startle	x			
Impulsivity		x		
Lethargy		x		

Signature teacher: _____

5-2017

(BD)

Questionnaire 2- Teacher
After the child followed the BAP – Method

Name of the teacher:	[REDACTED]
Number of lessons with the child per week:	
Name of the child:	[REDACTED]
Sex of the child:	Female
Age of the child:	12.06.2001 (12 years)
Date:	20.6.2013

Instructions:

Questions are related to the behavior and appearance of the child in class.

Can you observe the following qualities with this child? In which scale? Please fill in:

1 = never; 2 =sometimes; 3=often; 4=always

Emotion level	1	2	3	4
Sadness		✓		
Anxiety		✓		
Helplessness			✓	
Anger		✓		
Inactivity			✓	

Thinking level	1	2	3	4
Confusion		✓		
Concentration problems			✓	
Loss of control		✓		
Blackouts	✓			

Body level	1	2	3	4
Energy shortfall		✓		
Tiredness		✓		
Tremble	✓			
Loss of appetite	✓			

Behavior level	1	2	3	4
Social retreat		✓		
Crying	✓			
Apathy		✓		
Hectic	✓			
Stutter	✓			
Aggressiveness	✓			
Startle	✓	✓		
Impulsivity		✓		
Lethargy		✓		

Signature Teacher:

[REDACTED]

Questionnaire 1 - Child
While the child follows the BAP – Method (session 3)

CD

Name of the child:	[REDACTED]
Sex of the child:	female
Age of the child:	11 years
Date:	15.5.2013

Emotion level	Never	Sometimes	Often	Always
Are you sad?		X		
Do you feel guilty?			X	
Do you feel scared?		X		
Do you feel lonely?		X		
Do you feel helpless?		X		
Do you feel angry		X		
Do you feel dull and sluggish?			X	
Do you have worries?				X

Thinking level	Never	Sometimes	Often	Always
Do you mistrust others?			X	
Are you confused?		X		
Do you have problems with concentration?			X	
Do you lose control?			X	
Do you have to remember bad situations all over sudden	X			
Do you forget things?				X

Body level	Never	Sometimes	Often	Always
Do you feel sick?			X	
Do you have problems to breath?	X			
Do you have little energy?		X		
Do you feel tired?		X		
Do you shake?			X	
Is your heart beating fast?	X			
Do you feel pain in your body?				X
Are you less hungry?		X		

Behavior level	Never	Sometimes	Often	Always
Do you have problems to sleep?		X		
Do you have nightmares?		X		
Do you prefer playing alone?		X		
Do you cry?		X	X	
Do you feel restless?		X		
Do you pee in your bed?	X			
Do you easily get frightened?			X	
Are you acting without thinking?		X		
Do you not care about things?		X		
Are you acting out in play?			X	

Score:

Never = 1 ; Sometimes = 2 ; Often = 3 ; Always = 4

Questionnaire 2 - Child
After the child followed the BAP - Method

CD

Name of the child:	[REDACTED]
Sex of the child:	female
Age of the child:	11
Date:	27.06.2013

Emotion level	Never	Sometimes	Often	Always
Are you sad?		X		
Do you feel guilty?		X		
Do you feel scared?		X		
Do you feel lonely?		X		
Do you feel helpless?		X		
Do you feel angry		X		
Do you feel dull and sluggish?		X		
Do you have worries?			X	

Thinking level	Never	Sometimes	Often	Always
Do you mistrust others?			X	
Are you confused?		X		
Do you have problems with concentration?		X		
Do you lose control?		X		
Do you have to remember bad situations all over sudden	X			
Do you forget things?		X		

Body level	Never	Sometimes	Often	Always
Do you feel sick?		X		
Do you have problems to breath?	X			
Do you have little energy?		X		
Do you feel tired?		X		
Do you shake?		X		
Is your heart beating fast?	X			
Do you feel pain in your body?			X	
Are you less hungry?	X			

Behavior level	Never	Sometimes	Often	Always
Do you have problems to sleep?	X			
Do you have nightmares?		X		
Do you prefer playing alone?		X		
Do you cry?		X		
Do you feel restless?		X		
Do you pee in your bed?	X			
Do you easily get frightened?		X		
Are you acting without thinking?		X		
Do you not care about things?	X			
Are you acting out in play?		X		

Score:
Never = 1 ; Sometimes = 2, Often = 3 ; Always = 4

Questionnaire 1 – Teacher
Before the child will follow the BAP – Method

CD

Name of the teacher:	[REDACTED]
Number of lessons with the child per week:	
Name of the child:	[REDACTED]
Sex of the child:	Female
Age of the child:	11 years
Date:	15.2013

Instructions:

Questions are related to the behavior and appearance of the child in class.

Can you observe the following qualities with this child? In which scale? Please fill in:

1 = never; 2 = sometimes; 3 = often; 4 = always

Emotion level	1	2	3	4
Sadness		✓		
Anxiety		✓		
Helplessness		✓		
Anger			✓	
Inactivity		✓		

Thinking level	1	2	3	4
Confusion			✓	
Concentration problems				✓
Loss of control		✓		
Blackouts	✓			

Body level	1	2	3	4
Energy shortfall		✓		
Tiredness			✓	
Tremble	✓			
Loss of appetite		✓		

Behavior level	1	2	3	4
Social retreat		✓		
Crying		✓		
Apathy		✓		
Hectic		✓		
Stutter			✓	
Aggressiveness				✓
Startle		✓		
Impulsivity			✓	
Lethargy	✓			

Signature teacher: [REDACTED]

Questionnaire 2- Teacher
After the child followed the BAP – Method

CD

Name of the teacher:	[REDACTED]
Number of lessons with the child per week:	
Name of the child:	[REDACTED]
Sex of the child:	female
Age of the child:	11 years
Date:	20.6.2013

Instructions:

Questions are related to the behavior and appearance of the child in class.

Can you observe the following qualities with this child? In which scale? Please fill in:

1 = never; 2 =sometimes; 3=often; 4=always

Emotion level	1	2	3	4
Sadness		✓		
Anxiety		✓		
Helplessness		✓		
Anger		✓		
Inactivity		✓		

Thinking level	1	2	3	4
Confusion			✓	
Concentration problems			✓	
Loss of control		✓		
Blackouts	✓			

Body level	1	2	3	4
Energy shortfall		✓		
Tiredness		✓		
Tremble	✓			
Loss of appetite	✓			

Behavior level	1	2	3	4
Social retreat		✓		
Crying	✓			
Apathy		✓		
Hectic	✓			
Stutter		✓		
Aggressiveness			✓	
Startle		✓		
Impulsivity			✓	
Lethargy	✓			

Signature Teacher:

[REDACTED]

Questionnaire 1 - Child
While the child follows the BAP – Method (session 3)

DD

Name of the child:	[REDACTED]
Sex of the child:	male
Age of the child:	8 years
Date:	13.5.2013

Emotion level	Never	Sometimes	Often	Always
Are you sad?			X	
Do you feel guilty?		X		
Do you feel scared?				X
Do you feel lonely?		X		
Do you feel helpless?		X		
Do you feel angry				X
Do you feel dull and sluggish?		X		
Do you have worries?			X	

Thinking level	Never	Sometimes	Often	Always
Do you mistrust others?		X		
Are you confused?			X	
Do you have problems with concentration?				X
Do you lose control?		X		
Do you have to remember bad situations all over sudden			X	
Do you forget things?				X

Body level	Never	Sometimes	Often	Always
Do you feel sick?	X			
Do you have problems to breath?	X			
Do you have little energy?				X
Do you feel tired?				X
Do you shake?				X
Is your heart beating fast?		X		
Do you feel pain in your body?		X		
Are you less hungry?		X		

Behavior level	Never	Sometimes	Often	Always
Do you have problems to sleep?		X		
Do you have nightmares?	X			
Do you prefer playing alone?		X		
Do you cry?			X	
Do you feel restless?		X		
Do you pee in your bed?		X		
Do you easily get frightened?		X		
Are you acting without thinking?		X		
Do you not care about things?	X			
Are you acting out in play?		X		

Score:
Never = 1 ; Sometimes = 2 ; Often = 3 ; Always = 4

Questionnaire 2 - Child
After the child followed the BAP - Method

(DD)

Name of the child:	[REDACTED]
Sex of the child:	male
Age of the child:	8
Date:	24.6.2013

Emotion level	Never	Sometimes	Often	Always
Are you sad?			X	
Do you feel guilty?		X		
Do you feel scared?				X
Do you feel lonely?		X		
Do you feel helpless?		X		
Do you feel angry				X
Do you feel dull and sluggish?		X		
Do you have worries?			X	

Thinking level	Never	Sometimes	Often	Always
Do you mistrust others?		X		
Are you confused?			X	
Do you have problems with concentration?				X
Do you lose control?		X		
Do you have to remember bad situations all over sudden			X	
Do you forget things?				X

Body level	Never	Sometimes	Often	Always
Do you feel sick?	X			
Do you have problems to breath?	X			
Do you have little energy?				X
Do you feel tired?				X
Do you shake?				X
Is your heart beating fast?		X		
Do you feel pain in your body?		X		
Are you less hungry?		X		

Behavior level	Never	Sometimes	Often	Always
Do you have problems to sleep?		X		
Do you have nightmares?	X			
Do you prefer playing alone?		X		
Do you cry?			X	
Do you feel restless?		X		
Do you pee in your bed?		X		
Do you easily get frightened?		X		
Are you acting without thinking?		X		
Do you not care about things?	X			
Are you acting out in play?		X		

Score:
Never = 1 ; Sometimes = 2, Often = 3 ; Always = 4

Questionnaire 1 – Teacher
Before the child will follow the BAP – Method



Name of the teacher:	[Redacted]
Number of lessons with the child per week:	
Name of the child:	[Redacted]
Sex of the child:	male
Age of the child:	8
Date:	29.4.2013

Instructions:

Questions are related to the behavior and appearance of the child in class.

Can you observe the following qualities with this child? In which scale? Please fill in:

never sometimes often always
 1 = not correct; 2 = rather not correct; 3 = rather correct; 4 = correct

Emotion level	1	2	3	4
Sadness			✓	
Anxiety			✓	
Helplessness			✓	
Anger			✓	
Inactivity			✓	

Thinking level	1	2	3	4
Confusion			✓	
Concentration problems			✓	
Loss of control			✓	
Blackouts	✓			

Body level	1	2	3	4
Energy shortfall			✓	
Tiredness			✓	
Tremble			✓	
Loss of appetite	✓			

Behavior level	1	2	3	4
Social retreat				✓
Crying			✓	
Apathy	✓			
Hectic			✓	
Stutter	✓			
Aggressiveness			✓	
Startle			✓	
Impulsivity			✓	
Lethargy			✓	

Signature teacher: [Redacted]

Questionnaire 2- Teacher
After the child followed the BAP - Method

(DD)

Name of the teacher:	[REDACTED]
Number of lessons with the child per week:	
Name of the child:	[REDACTED]
Sex of the child:	male
Age of the child:	03.09.2004
Date:	19.6.2013

Instructions:

Questions are related to the behavior and appearance of the child in class.
Can you observe the following qualities with this child? In which scale? Please fill in:

1 = never; 2 =sometimes; 3=often; 4=always

Emotion level	1	2	3	4
Sadness		✓		
Anxiety		✓		
Helplessness		✓		
Anger			✓	
Inactivity		✓		

Thinking level	1	2	3	4
Confusion		✓		
Concentration problems		✓		
Loss of control			✓	
Blackouts	✓			

Body level	1	2	3	4
Energy shortfall		✓		
Tiredness		✓		
Tremble		✓		
Loss of appetite	✓			

Behavior level	1	2	3	4
Social retreat		✓		
Crying	✓			
Apathy		✓		
Hectic		✓		
Stutter	✓			
Aggressiveness			✓	
Startle		✓		
Impulsivity		✓		
Lethargy		✓		

Signature Teacher: [REDACTED]

Questionnaire 1 - Child
While the child follows the BAP – Method (session 3)

(ED)

Name of the child:	[REDACTED]
Sex of the child:	male
Age of the child:	8
Date:	13.5.2013

Emotion level	Never	Sometimes	Often	Always
Are you sad?		X		
Do you feel guilty?			X	
Do you feel scared?	X			
Do you feel lonely?	X			
Do you feel helpless?	X			
Do you feel angry			X	
Do you feel dull and sluggish?	X			
Do you have worries?	X			

Thinking level	Never	Sometimes	Often	Always
Do you mistrust others?		X		
Are you confused?			X	
Do you have problems with concentration?			X	
Do you lose control?		X		
Do you have to remember bad situations all over sudden	X			
Do you forget things?		X		

Body level	Never	Sometimes	Often	Always
Do you feel sick?		X		
Do you have problems to breath?	X			
Do you have little energy?	X			
Do you feel tired?		X		
Do you shake?	X			
Is your heart beating fast?		X		
Do you feel pain in your body?	X			
Are you less hungry?		X		

Behavior level	Never	Sometimes	Often	Always
Do you have problems to sleep?		X		
Do you have nightmares?		X		
Do you prefer playing alone?	X			
Do you cry?		X		
Do you feel restless?			X	
Do you pee in your bed?		X		
Do you easily get frightened?		X		
Are you acting without thinking?		X		
Do you not care about things?	X			
Are you acting out in play?		X		

Score:
Never = 1 ; Sometimes = 2 ; Often = 3 ; Always = 4

Questionnaire 2 - Child
After the child followed the BAP - Method

(EO)

Name of the child:	[REDACTED]
Sex of the child:	male
Age of the child:	3
Date:	24.6.2013

Emotion level	Never	Sometimes	Often	Always
Are you sad?		X		
Do you feel guilty?		X		
Do you feel scared?	X			
Do you feel lonely?	X			
Do you feel helpless?	X			
Do you feel angry		X		
Do you feel dull and sluggish?	X			
Do you have worries?	X			

Thinking level	Never	Sometimes	Often	Always
Do you mistrust others?		X		
Are you confused?			X	
Do you have problems with concentration?			X	
Do you lose control?		X		
Do you have to remember bad situations all over sudden	X			
Do you forget things?		X		

Body level	Never	Sometimes	Often	Always
Do you feel sick?	X	X		
Do you have problems to breath?	X			
Do you have little energy?	X			
Do you feel tired?		X		
Do you shake?	X			
Is your heart beating fast?	X			
Do you feel pain in your body?	X			
Are you less hungry?		X		

Behavior level	Never	Sometimes	Often	Always
Do you have problems to sleep?	X			
Do you have nightmares?	X			
Do you prefer playing alone?	X			
Do you cry?		X		
Do you feel restless?			X	
Do you pee in your bed?		X		
Do you easily get frightened?		X		
Are you acting without thinking?		X		
Do you not care about things?	X			
Are you acting out in play?		X		

Score:

Never = 1 ; Sometimes = 2, Often = 3 ; Always = 4

Questionnaire 1 – Teacher
Before the child will follow the BAP – Method

EO

Name of the teacher:	
Number of lessons with the child per week:	
Name of the child:	
Sex of the child:	male
Age of the child:	8 years
Date:	29.4.2013

Instructions:

Questions are related to the behavior and appearance of the child in class.

Can you observe the following qualities with this child? In which scale? Please fill in:

1 = *never* 2 = *sometimes* 3 = *often* 4 = *always*
 1 = not correct; 2 = rather not correct; 3 = rather correct; 4 = correct

Emotion level	1	2	3	4
Sadness	✓			
Anxiety		✓		
Helplessness	✓			
Anger			✓	
Inactivity			✓	

Thinking level	1	2	3	4
Confusion	✓			
Concentration problems			✓	
Loss of control		✓		
Blackouts	✓			

Body level	1	2	3	4
Energy shortfall		✓		
Tiredness		✓		
Tremble		✓		
Loss of appetite		✓		

Behavior level	1	2	3	4
Social retreat	✓			
Crying	✓			
Apathy		✓		
Hectic		✓		
Stutter	✓			
Aggressiveness	✓			
Startle	✓			
Impulsivity		✓		
Lethargy		✓		

Signature teacher: _____

Questionnaire 2- Teacher
After the child followed the BAP - Method

(ED)

Name of the teacher:	[REDACTED]
Number of lessons with the child per week:	
Name of the child:	[REDACTED]
Sex of the child:	male
Age of the child:	21.07.2004
Date:	20.6.2013

Instructions:

Questions are related to the behavior and appearance of the child in class.
Can you observe the following qualities with this child? In which scale? Please fill in:

1 = never; 2 =sometimes; 3=often; 4=always

Emotion level	1	2	3	4
Sadness	✓			
Anxiety	✓			
Helplessness	✓			
Anger		✓		
Inactivity	✓			

Thinking level	1	2	3	4
Confusion	✓			
Concentration problems		✓		
Loss of control	✓			
Blackouts	✓			

Body level	1	2	3	4
Energy shortfall		✓		
Tiredness		✓		
Tremble		✓		
Loss of appetite	✓			

Behavior level	1	2	3	4
Social retreat	✓			
Crying	✓			
Apathy	✓			
Hectic	✓			
Stutter	✓			
Aggressiveness		✓		
Startle		✓		
Impulsivity		✓		
Lethargy		✓		

Signature Teacher: [REDACTED]

Questionnaire 1 - Child
While the child follows the BAP – Method (session 3)

FD

Name of the child:	[REDACTED]
Sex of the child:	male
Age of the child:	4
Date:	13.5.2013

Emotion level	Never	Sometimes	Often	Always
Are you sad?	X			
Do you feel guilty?	X			
Do you feel scared?			X	
Do you feel lonely?			X	
Do you feel helpless?			X	
Do you feel angry	X			
Do you feel dull and sluggish?		X		
Do you have worries?			X	

Thinking level	Never	Sometimes	Often	Always
Do you mistrust others?				X
Are you confused?		X		
Do you have problems with concentration?			X	
Do you lose control?	X			
Do you have to remember bad situations all over sudden			X	
Do you forget things?			X	

Body level	Never	Sometimes	Often	Always
Do you feel sick?		X		
Do you have problems to breath?			X	
Do you have little energy?			X	
Do you feel tired?			X	
Do you shake?	X			
Is your heart beating fast?		X		
Do you feel pain in your body?	X			
Are you less hungry?	X			

Behavior level	Never	Sometimes	Often	Always
Do you have problems to sleep?	X			
Do you have nightmares?		X		
Do you prefer playing alone?			X	
Do you cry?		X		
Do you feel restless?		X		
Do you pee in your bed?		X		
Do you easily get frightened?			X	
Are you acting without thinking?			X	
Do you not care about things?		X		
Are you acting out in play?			X	

Score:
Never = 1 ; Sometimes = 2 ; Often = 3 ; Always = 4

Questionnaire 2 - Child
After the child followed the BAP - Method

(FD)

Name of the child:	[REDACTED]
Sex of the child:	male
Age of the child:	9
Date:	28.6.2013

Emotion level	Never	Sometimes	Often	Always
Are you sad?		X		
Do you feel guilty?	X			
Do you feel scared?			X	
Do you feel lonely?		X		
Do you feel helpless?		X		
Do you feel angry	X			
Do you feel dull and sluggish?	X			
Do you have worries?			X	

Thinking level	Never	Sometimes	Often	Always
Do you mistrust others?			X	
Are you confused?		X		
Do you have problems with concentration?			X	
Do you lose control?		X		
Do you have to remember bad situations all over sudden	X			
Do you forget things?	X			

Body level	Never	Sometimes	Often	Always
Do you feel sick?		X		
Do you have problems to breath?			X	
Do you have little energy?		X		
Do you feel tired?		X		
Do you shake?	X			
Is your heart beating fast?		X		
Do you feel pain in your body?	X			
Are you less hungry?	X			

Behavior level	Never	Sometimes	Often	Always
Do you have problems to sleep?	X			
Do you have nightmares?		X		
Do you prefer playing alone?		X		
Do you cry?	X			
Do you feel restless?	X			
Do you pee in your bed?	X			
Do you easily get frightened?		X		
Are you acting without thinking?			X	
Do you not care about things?		X		
Are you acting out in play?		X		

Score:

Never = 1 ; Sometimes = 2, Often = 3 ; Always = 4

Questionnaire1 - Teacher
Before the child will follow the BAP – Method



Name of the teacher:	[REDACTED]
Number of lessons with the child per week:	
Name of the child:	[REDACTED]
Sex of the child:	male
Age of the child:	8
Date:	29.4.2013

Instructions:

Questions are related to the behavior and appearance of the child in class.
Can you observe the following qualities with this child? In which scale? Please fill in:

1 = ^{never} not correct, 2 = ^{sometimes} rather not correct, 3 = ^{often} rather correct, 4 = ^{always} correct

Body level	1	2	3	4
Energy shortfall	✓			
Tiredness		✓		
Tremble	✓			
Loss of appetite	✓			

Behavior level	1	2	3	4
Social retreat				✓
Crying		✓		
Apathy	✓			
Hectic				✓
Stutter			✓	
Aggressiveness				✓
Startle			✓	
Impulsivity			✓	
Lethargy			✓	

Emotion level	1	2	3	4
Sadness			✓	
Anxiety			✓	
Helplessness		✓		
Anger				✓
Inactivity			✓	

Thinking level	1	2	3	4
Confusion	✓			
Concentration problems				✓
Loss of control				✓
Blackouts	✓			

Questionnaire 2- Teacher
After the child followed the BAP – Method

Name of the teacher:	[REDACTED]	FD
Number of lessons with the child per week:	[REDACTED]	
Name of the child:	[REDACTED]	
Sex of the child:	male	
Age of the child:	1.10.2004	
Date:	19.6.2013	

Instructions:

Questions are related to the behavior and appearance of the child in class.
Can you observe the following qualities with this child? In which scale? Please fill in:

1 = never; 2 =sometimes; 3=often; 4=always

Emotion level	1	2	3	4
Sadness			✓	
Anxiety			✓	
Helplessness		✓		
Anger			✓	
Inactivity			✓	

Thinking level	1	2	3	4
Confusion		✓		
Concentration problems		✓		
Loss of control			✓	
Blackouts		✓		

Body level	1	2	3	4
Energy shortfall		✓		
Tiredness		✓		
Tremble		✓		
Loss of appetite		✓		

Behavior level	1	2	3	4
Social retreat		✓		
Crying			✓	
Apathy	✓			
Hectic				✓
Stutter			✓	
Aggressiveness				✓
Startle			✓	
Impulsivity			✓	
Lethargy			✓	

Signature Teacher: [REDACTED]

Questionnaire 1 - Child
Before the child will follow the BAP - Method

Name of the child:	[REDACTED]	(G)
Sex of the child:	female	
Age of the child:	11	
Date:		

Emotion level	Never	Sometimes	Often	Always
Are you sad?		X		
Do you feel guilty?	X			
Do you feel scared?		X		
Do you feel lonely?		X		
Do you feel helpless?			X	
Do you feel angry			X	
Do you feel dull and sluggish?		X		
Do you have worries?	X			

Thinking level	Never	Sometimes	Often	Always
Do you mistrust others?				X
Are you confused?		X		
Do you have problems with concentration?		X		
Do you lose control?		X		
Do you have to remember bad situations all over sudden		X		
Do you forget things?				X

Body level	Never	Sometimes	Often	Always
Do you feel sick?		X		
Do you have problems to breath?		X		
Do you have little energy?			X	
Do you feel tired?				X
Do you shake?	X			
Is your heart beating fast?			X	
Do you feel pain in your body?			X	
Are you less hungry?	X			

Behavior level	Never	Sometimes	Often	Always
Do you have problems to sleep?			X	
Do you have nightmares?			X	
Do you prefer playing alone?				X
Do you cry?		X		
Do you feel restless?			X	
Do you pee in your bed?	X			
Do you easily get frightened?		X		
Are you acting without thinking?		X		
Do you not care about things?		X		
Are you acting out in play?				X

Questionnaire 1 - Child
While the child follows the BAP – Method (session 3)

GO

Name of the child:	[REDACTED]
Sex of the child:	male
Age of the child:	11
Date:	15.05.2013

Emotion level	Never	Sometimes	Often	Always
Are you sad?		X		
Do you feel guilty?	X			
Do you feel scared?			X	
Do you feel lonely?			X	
Do you feel helpless?	X			
Do you feel angry		X		
Do you feel dull and sluggish?	X			
Do you have worries?				X

Thinking level	Never	Sometimes	Often	Always
Do you mistrust others?		X		
Are you confused?		X		
Do you have problems with concentration?	X			
Do you lose control?		X		
Do you have to remember bad situations all over sudden		X		
Do you forget things?		X		

Body level	Never	Sometimes	Often	Always
Do you feel sick?	X			
Do you have problems to breath?	X			
Do you have little energy?		X		
Do you feel tired?		X		
Do you shake?		X		
Is your heart beating fast?	X			
Do you feel pain in your body?		X		
Are you less hungry?		X		

Behavior level	Never	Sometimes	Often	Always
Do you have problems to sleep?		X		
Do you have nightmares?		X		
Do you prefer playing alone?	X			
Do you cry?		X		
Do you feel restless?	X			
Do you pee in your bed?	X			
Do you easily get frightened?	X			
Are you acting without thinking?		X		
Do you not care about things?		X		
Are you acting out in play?		X		

Score:

Never = 1 ; Sometimes = 2 ; Often = 3 ; Always = 4

Questionnaire 2 - Child
After the child followed the BAP - Method

GD

Name of the child:	[REDACTED]
Sex of the child:	male
Age of the child:	11 years
Date:	09.07.2013

Emotion level	Never	Sometimes	Often	Always
Are you sad?		X		
Do you feel guilty?	X			
Do you feel scared?	X			
Do you feel lonely?	X			
Do you feel helpless?	X			
Do you feel angry	X			
Do you feel dull and sluggish?	X			
Do you have worries?	X			

Thinking level	Never	Sometimes	Often	Always
Do you mistrust others?		X		
Are you confused?		X		
Do you have problems with concentration?	X			
Do you lose control?	X			
Do you have to remember bad situations all over sudden		X		
Do you forget things?	X			

Body level	Never	Sometimes	Often	Always
Do you feel sick?	X			
Do you have problems to breath?	X			
Do you have little energy?		X		
Do you feel tired?		X		
Do you shake?	X			
Is your heart beating fast?		X		
Do you feel pain in your body?	X			
Are you less hungry?	X			

Behavior level	Never	Sometimes	Often	Always
Do you have problems to sleep?	X			
Do you have nightmares?	X			
Do you prefer playing alone?	X			
Do you cry?	X			
Do you feel restless?	X			
Do you pee in your bed?	X			
Do you easily get frightened?	X			
Are you acting without thinking?	X			
Do you not care about things?		X		
Are you acting out in play?	X			

Score:
Never = 1 ; Sometimes = 2, Often = 3 ; Always = 4

Questionnaire 1 – Teacher
Before the child will follow the BAP – Method

(GD)

Name of the teacher:	[REDACTED]
Number of lessons with the child per week:	
Name of the child:	[REDACTED]
Sex of the child:	male
Age of the child:	12.06.2002 (11 years)
Date:	17.05.2013

Instructions:

Questions are related to the behavior and appearance of the child in class.
Can you observe the following qualities with this child? In which scale? Please fill in:

1 = not correct; 2 = rather not correct; 3 = rather correct; 4 = correct

Emotion level	1	2	3	4
Sadness	✓			
Anxiety	✓			
Helplessness		✓		
Anger		✓		
Inactivity			✓	

Thinking level	1	2	3	4
Confusion			✓	
Concentration problems			✓	
Loss of control		✓		
Blackouts	✓			

Body level	1	2	3	4
Energy shortfall			✓	
Tiredness			✓	
Tremble	✓			
Loss of appetite	✓			

Behavior level	1	2	3	4
Social retreat	✓			
Crying	✓			
Apathy		✓		
Hectic		✓		
Stutter	✓	✓		
Aggressiveness		✓		
Startle	✓			
Impulsivity		✓		
Lethargy		✓		

Signature teacher: [REDACTED]

Questionnaire 2- Teacher
After the child followed the BAP – Method



Name of the teacher:	[REDACTED]
Number of lessons with the child per week:	
Name of the child:	[REDACTED]
Sex of the child:	male
Age of the child:	12.06.2002 (-11 years)
Date:	16.07.2013

Instructions:

Questions are related to the behavior and appearance of the child in class.
Can you observe the following qualities with this child? In which scale? Please fill in:

1 = never; 2 =sometimes; 3=often; 4=always

Emotion level	1	2	3	4
Sadness	✓			
Anxiety	✓			
Helplessness	✓			
Anger		✓		
Inactivity			✓	

Thinking level	1	2	3	4
Confusion		✓		
Concentration problems		✓		
Loss of control		✓		
Blackouts	✓			

Body level	1	2	3	4
Energy shortfall		✓		
Tiredness		✓		
Tremble	✓			
Loss of appetite	✓			

Behavior level	1	2	3	4
Social retreat	✓			
Crying	✓			
Apathy	✓			
Hectic		✓		
Stutter	✓			
Aggressiveness		✓		
Startle	✓			
Impulsivity		✓		
Lethargy		✓		

Signature Teacher:

[REDACTED]

Questionnaire 1 - Child
While the child follows the BAP – Method (session 3)

(HD)

Name of the child:	[REDACTED]
Sex of the child:	male
Age of the child:	11 years
Date:	16.5.2013

Emotion level	Never	Sometimes	Often	Always
Are you sad?		X		
Do you feel guilty?	X			
Do you feel scared?		X		
Do you feel lonely?	X			
Do you feel helpless?			X	
Do you feel angry		X		
Do you feel dull and sluggish?		X		
Do you have worries?		X		

Thinking level	Never	Sometimes	Often	Always
Do you mistrust others?				X
Are you confused?		X		
Do you have problems with concentration?			X	
Do you lose control?		X		
Do you have to remember bad situations all over sudden			X	
Do you forget things?	X			

Body level	Never	Sometimes	Often	Always
Do you feel sick?	X			
Do you have problems to breath?	X			
Do you have little energy?	X			
Do you feel tired?		X		
Do you shake?		X		
Is your heart beating fast?	X			
Do you feel pain in your body?		X		
Are you less hungry?		X		

Behavior level	Never	Sometimes	Often	Always
Do you have problems to sleep?	X			
Do you have nightmares?		X		
Do you prefer playing alone?		X		
Do you cry?			X	
Do you feel restless?	X			
Do you pee in your bed?	X			
Do you easily get frightened?				X
Are you acting without thinking?		X		
Do you not care about things?		X		
Are you acting out in play?			X	

Score:
Never = 1 ; Sometimes = 2 ; Often = 3 ; Always = 4

Questionnaire 2 - Child
After the child followed the BAP - Method

(HD)

Name of the child:	[REDACTED]
Sex of the child:	male
Age of the child:	11 years
Date:	23.06.2013

Emotion level	Never	Sometimes	Often	Always
Are you sad?		X		
Do you feel guilty?	X			
Do you feel scared?		X		
Do you feel lonely?	X			
Do you feel helpless?		X		
Do you feel angry	X			
Do you feel dull and sluggish?	X			
Do you have worries?		X		

Thinking level	Never	Sometimes	Often	Always
Do you mistrust others?		X		
Are you confused?		X		
Do you have problems with concentration?		X		
Do you lose control?		X		
Do you have to remember bad situations all over sudden			X	
Do you forget things?		X		

Body level	Never	Sometimes	Often	Always
Do you feel sick?	X			
Do you have problems to breath?	X			
Do you have little energy?	X			
Do you feel tired?		X		
Do you shake?		X		
Is your heart beating fast?	X			
Do you feel pain in your body?	X			
Are you less hungry?	X			

Behavior level	Never	Sometimes	Often	Always
Do you have problems to sleep?	X			
Do you have nightmares?		X		
Do you prefer playing alone?	X			
Do you cry?		X		
Do you feel restless?	X			
Do you pee in your bed?	X			
Do you easily get frightened?			X	
Are you acting without thinking?		X		
Do you not care about things?	X			
Are you acting out in play?	X			

Score:

Never = 1 ; Sometimes = 2, Often = 3 ; Always = 4

Questionnaire 2- Teacher
After the child followed the BAP – Method

(4D)

Name of the teacher:	
Number of lessons with the child per week:	
Name of the child:	Ashley Mannus
Sex of the child:	male
Age of the child:	21.06.2001
Date:	3.6.2013

Instructions:

Questions are related to the behavior and appearance of the child in class.

Can you observe the following qualities with this child? In which scale? Please fill in:

1 = never; 2 =sometimes; 3=often; 4=always

Emotion level	1	2	3	4
Sadness		✓		
Anxiety			✓	
Helplessness			✓	
Anger			✓	
Inactivity		✓		

Thinking level	1	2	3	4
Confusion				✓
Concentration problems				✓
Loss of control			✓	
Blackouts	✓			

Body level	1	2	3	4
Energy shortfall		✓		
Tiredness		✓		
Tremble	✓			
Loss of appetite	✓			

Behavior level	1	2	3	4
Social retreat	✓			
Crying	✓			
Apathy	✓			
Hectic	✓			
Stutter	✓			
Aggressiveness			✓	
Startle	✓			
Impulsivity				✓
Lethargy	✓			

Signature Teacher:



Questionnaire 2- Teacher
After the child followed the BAP - Method

(4D)

Name of the teacher:	[REDACTED]
Number of lessons with the child per week:	
Name of the child:	[REDACTED]
Sex of the child:	male
Age of the child:	21.06.2011
Date:	25.9.6.2013

Instructions:

Questions are related to the behavior and appearance of the child in class.

Can you observe the following qualities with this child? In which scale? Please fill in:

1 = never; 2 =sometimes; 3=often; 4=always

Emotion level	1	2	3	4
Sadness		✓		
Anxiety			✓	
Helplessness			✓	
Anger			✓	
Inactivity		✓		

Thinking level	1	2	3	4
Confusion				✓
Concentration problems				✓
Loss of control			✓	
Blackouts	✓			

Body level	1	2	3	4
Energy shortfall		✓		
Tiredness		✓		
Tremble	✓			
Loss of appetite	✓			

Behavior level	1	2	3	4
Social retreat	✓			
Crying	✓			
Apathy	✓			
Hectic	✓			
Stutter	✓			
Aggressiveness			✓	
Startle	✓			
Impulsivity				✓
Lethargy	✓			

Signature Teacher:

[REDACTED]

Questionnaire 1 – Teacher
Before the child will follow the BAP – Method

Name of the teacher:	
Number of lessons with the child per week:	
Name of the child:	(A)
Sex of the child:	male
Age of the child:	9
Date:	

Instructions:

Questions are related to the behavior and appearance of the child in class.

Can you observe the following qualities with this child? In which scale? Please fill in:

1 = never; 2 = sometimes; 3 = often; 4 = always

Emotion level	1	2	3	4
Sadness			X	
Anxiety			X	
Helplessness		X		
Anger			X	
Inactivity	X			

Thinking level	1	2	3	4
Confusion	X			
Concentration problems			X	
Loss of control	X			
Blackouts	X			

Body level	1	2	3	4
Energy shortfall			X	
Tiredness			X	
Tremble	X			
Loss of appetite	X			

Behavior level	1	2	3	4
Social retreat	X			
Crying		X		
Apathy			X	
Hectic				X
Stutter	X			
Aggressiveness		X		
Startle	X			
Impulsivity			X	
Lethargy			X	

Signature teacher:

[Redacted Signature]

Questionnaire 2- Teacher
After the child followed the BAP - Method

Name of the teacher:	[REDACTED]
Number of lessons with the child per week:	
Name of the child:	[REDACTED] (A)
Sex of the child:	male
Age of the child:	9
Date:	term 03/2013

Instructions:

Questions are related to the behavior and appearance of the child in class.
Can you observe the following qualities with this child? In which scale? Please fill in:

1 = never; 2 =sometimes; 3=often; 4=always

Emotion level	1	2	3	4
Sadness			X	
Anxiety		X		
Helplessness			X	
Anger		X		
Inactivity			X	

Thinking level	1	2	3	4
Confusion			X	
Concentration problems			X	
Loss of control		X		
Blackouts	X			

Body level	1	2	3	4
Energy shortfall		X		
Tiredness		X		
Tremble		X		
Loss of appetite	X			

Behavior level	1	2	3	4
Social retreat		X		
Crying		X		
Apathy		X		
Hectic			X	
Stutter		X		
Aggressiveness		X		
Startle		X		
Impulsivity		X		
Lethargy			X	

Signature Teacher:

[REDACTED]

Questionnaire 2 - Child
After the child followed the BAP - Method



Name of the child:	
Sex of the child:	male
Age of the child:	9
Date:	

Emotion level	Never	Sometimes	Often	Always
Are you sad?	X			
Do you feel guilty?		X		
Do you feel scared?	X			
Do you feel lonely?		X		
Do you feel helpless?		X		
Do you feel angry		X		
Do you feel dull and sluggish?	X			
Do you have worries?		X		

Thinking level	Never	Sometimes	Often	Always
Do you mistrust others?		X		
Are you confused?		X		
Do you have problems with concentration?		X		
Do you lose control?	X			
Do you have to remember bad situations all over sudden		X		
Do you forget things?			X	

Body level	Never	Sometimes	Often	Always
Do you feel sick?	X			
Do you have problems to breath?		X		
Do you have little energy?		X		
Do you feel tired?		X		
Do you shake?	X			
Is your heart beating fast?	X			
Do you feel pain in your body?	X			
Are you less hungry?		X		

Behavior level	Never	Sometimes	Often	Always
Do you have problems to sleep?		X		
Do you have nightmares?		X		
Do you prefer playing alone?	X			
Do you cry?	X			
Do you feel restless?		X		
Do you pee in your bed?	X			
Do you easily get frightened?		X		
Are you acting without thinking?		X		
Do you not care about things?	X			
Are you acting out in play?	X			

Score:

Never = 1 ; Sometimes = 2, Often = 3 ; Always = 4

Questionnaire 1 - Child
Before the child will follow the BAP - Method

Name of the child: [REDACTED]	A
Sex of the child: <u>male</u>	
Age of the child: <u>9</u>	
Date:	

Emotion level	Never	Sometimes	Often	Always
Are you sad?	X			
Do you feel guilty?		X		
Do you feel scared?	X			
Do you feel lonely?		X		
Do you feel helpless?		X		
Do you feel angry				X
Do you feel dull and sluggish?			X	
Do you have worries?				X

Thinking level	Never	Sometimes	Often	Always
Do you mistrust others?		X	X	
Are you confused?		X		
Do you have problems with concentration?				X
Do you lose control?	X			
Do you have to remember bad situations all over sudden			X	
Do you forget things?				X

Body level	Never	Sometimes	Often	Always
Do you feel sick?	X			
Do you have problems to breath?		X		
Do you have little energy?	X			
Do you feel tired?			X	
Do you shake?		X		
Is your heart beating fast?	X			
Do you feel pain in your body?	X			
Are you less hungry?				X

Behavior level	Never	Sometimes	Often	Always
Do you have problems to sleep?				X
Do you have nightmares?		X		
Do you prefer playing alone?	X			X
Do you cry?	X			
Do you feel restless?		X		
Do you pee in your bed?	X			
Do you easily get frightened?				X
Are you acting without thinking?		X		
Do you not care about things?	X			
Are you acting out in play?	X			

Questionnaire 2- Teacher
After the child followed the BAP – Method

Name of the teacher:	
Number of lessons with the child per week:	
Name of the child:	(R)
Sex of the child:	male
Age of the child:	10
Date:	Term 03/2013

Instructions:

Questions are related to the behavior and appearance of the child in class.
Can you observe the following qualities with this child? In which scale? Please fill in:

1 = never; 2 =sometimes; 3=often; 4=always

Emotion level	1	2	3	4
Sadness		x		
Anxiety		x		
Helplessness		x		
Anger	x			
Inactivity			x	

Thinking level	1	2	3	4
Confusion			x	
Concentration problems			x	
Loss of control	x			
Blackouts	x			

Body level	1	2	3	4
Energy shortfall	x			
Tiredness	x			
Tremble	x			
Loss of appetite	x			

Behavior level	1	2	3	4
Social retreat		x		
Crying	x			
Apathy			x	
Hectic	x			
Stutter	x			
Aggressiveness	x			
Startle		x		
Impulsivity			x	
Lethargy		x	x	

Signature Teacher:

[Redacted Signature]

Questionnaire 1 – Teacher
Before the child will follow the BAP – Method

Name of the teacher:	
Number of lessons with the child per week:	
Name of the child:	(32)
Sex of the child:	male
Age of the child:	10
Date:	

Instructions:

Questions are related to the behavior and appearance of the child in class.
Can you observe the following qualities with this child? In which scale? Please fill in:

1 = never; 2 = sometimes; 3 = often; 4 = always

Emotion level	1	2	3	4
Sadness	X			
Anxiety	X			
Helplessness			X	
Anger	X			
Inactivity			X	

Thinking level	1	2	3	4
Confusion			X	
Concentration problems			X	
Loss of control		X		
Blackouts	X			

Body level	1	2	3	4
Energy shortfall		X		
Tiredness		X		
Tremble	X			
Loss of appetite	X			

Behavior level	1	2	3	4
Social retreat		✓		
Crying	X			
Apathy			X	
Hectic	X			
Stutter		X		
Aggressiveness	X			
Startle			X	
Impulsivity		X		
Lethargy				X

Signature teacher:

[Redacted Signature]

Questionnaire 2 - Child
After the child followed the BAP - Method

(BA)

Name of the child:	
Sex of the child:	male
Age of the child:	10
Date:	

Emotion level	Never	Sometimes	Often	Always
Are you sad?	X			
Do you feel guilty?		X		
Do you feel scared?	X			
Do you feel lonely?		X		
Do you feel helpless?	X			
Do you feel angry		X		
Do you feel dull and sluggish?	X			
Do you have worries?	X			

Thinking level	Never	Sometimes	Often	Always
Do you mistrust others?	X			
Are you confused?	X			
Do you have problems with concentration?		X		
Do you lose control?	X			
Do you have to remember bad situations all over sudden			X	
Do you forget things?		X		

Body level	Never	Sometimes	Often	Always
Do you feel sick?		X		
Do you have problems to breath?	X			
Do you have little energy?	X			
Do you feel tired?	X			
Do you shake?	X			
Is your heart beating fast?		X		
Do you feel pain in your body?			X	
Are you less hungry?	X			

Behavior level	Never	Sometimes	Often	Always
Do you have problems to sleep?		X		
Do you have nightmares?		X		
Do you prefer playing alone?		X		
Do you cry?	X			
Do you feel restless?	X			
Do you pee in your bed?	X			
Do you easily get frightened?		X		
Are you acting without thinking?			X	
Do you not care about things?	X			
Are you acting out in play?		X		

Score:
Never = 1 ; Sometimes = 2, Often = 3 ; Always = 4

Questionnaire 1 - Child
Before the child will follow the BAP - Method

Name of the child: [REDACTED]	(B)
Sex of the child: <u>male</u>	
Age of the child: <u>10</u>	
Date: _____	

Emotion level	Never	Sometimes	Often	Always
Are you sad?	X			
Do you feel guilty?		X		
Do you feel scared?	X			
Do you feel lonely?		X		
Do you feel helpless?	X			
Do you feel angry		X		
Do you feel dull and sluggish?		X		
Do you have worries?		X		

Thinking level	Never	Sometimes	Often	Always
Do you mistrust others?	X			B
Are you confused?	X			
Do you have problems with concentration?		X		
Do you lose control?		X		
Do you have to remember bad situations all over sudden				X
Do you forget things?		X		

Body level	Never	Sometimes	Often	Always
Do you feel sick?		X		
Do you have problems to breath?	X			
Do you have little energy?	X			
Do you feel tired?	X			
Do you shake?	X			
Is your heart beating fast?		X		
Do you feel pain in your body?				X
Are you less hungry?	X			

Behavior level	Never	Sometimes	Often	Always
Do you have problems to sleep?		X		
Do you have nightmares?			X	
Do you prefer playing alone?		X		
Do you cry?	X			
Do you feel restless?	X			
Do you pee in your bed?	X			
Do you easily get frightened?			X	
Are you acting without thinking?			X	
Do you not care about things?	X			
Are you acting out in play?		X		

Questionnaire 2- Teacher
After the child followed the BAP - Method

Name of the teacher:	[REDACTED]
Number of lessons with the child per week:	
Name of the child:	[REDACTED] (CA)
Sex of the child:	female
Age of the child:	11
Date:	Term 03/2013

Instructions:

Questions are related to the behavior and appearance of the child in class.
Can you observe the following qualities with this child? In which scale? Please fill in:

1 = never; 2=sometimes; 3=often; 4=always

Emotion level	1	2	3	4
Sadness	✓			
Anxiety	✓			
Helplessness		✓		
Anger	✓			
Inactivity		✓		

Thinking level	1	2	3	4
Confusion				✓
Concentration problems			✓	
Loss of control	✓			
Blackouts	✓			

Body level	1	2	3	4
Energy shortfall	✓			
Tiredness	✓			
Tremble	✓			
Loss of appetite	✓			

Behavior level	1	2	3	4
Social retreat	✓			
Crying	✓	✓		
Apathy	✓	✓		
Hectic	✓			
Stutter	✓			
Aggressiveness	✓	✓		
Startle	✓			
Impulsivity				✓
Lethargy	✓			

Signature Teacher:

[Signature]

Questionnaire 1 – Teacher
Before the child will follow the BAP – Method

Name of the teacher:	
Number of lessons with the child per week:	
Name of the child:	
Sex of the child:	female
Age of the child:	11
Date:	

CA

Instructions:

Questions are related to the behavior and appearance of the child in class.

Can you observe the following qualities with this child? In which scale? Please fill in:

1 = never; 2 = sometimes; 3 = often; 4 = always

Emotion level	1	2	3	4
Sadness			✓	
Anxiety			✓	
Helplessness			✓	
Anger		✓		
Inactivity		✓		

Thinking level	1	2	3	4
Confusion				✓
Concentration problems				✓
Loss of control		✓		
Blackouts		✓		

Body level	1	2	3	4
Energy shortfall		✓		
Tiredness			✓	
Tremble	✓			
Loss of appetite	✓			

Behavior level	1	2	3	4
Social retreat		✓		
Crying		✓	✓	
Apathy		✓		
Hectic		✓		
Stutter	✓			
Aggressiveness			✓	
Startle	✓			
Impulsivity			✓	
Lethargy	✓			

Signature teacher:

Questionnaire 2 - Child
After the child followed the BAP - Method

(CA)

Name of the child:	
Sex of the child:	female
Age of the child:	11
Date:	

Emotion level	Never	Sometimes	Often	Always
Are you sad?		X		
Do you feel guilty?	X			
Do you feel scared?			X	
Do you feel lonely?		X		
Do you feel helpless?			X	
Do you feel angry			X	
Do you feel dull and sluggish?	X			
Do you have worries?		X		

Thinking level	Never	Sometimes	Often	Always
Do you mistrust others?		X		
Are you confused?			X	
Do you have problems with concentration?		X		
Do you lose control?	X			
Do you have to remember bad situations all over sudden			X	
Do you forget things?		X		

Body level	Never	Sometimes	Often	Always
Do you feel sick?		X		
Do you have problems to breath?			X	
Do you have little energy?		X		
Do you feel tired?			X	
Do you shake?	X			
Is your heart beating fast?		X		
Do you feel pain in your body?		X		
Are you less hungry?		X		

Behavior level	Never	Sometimes	Often	Always
Do you have problems to sleep?		X		
Do you have nightmares?			X	
Do you prefer playing alone?		X		
Do you cry?			X	
Do you feel restless?		X		
Do you pee in your bed?	X			
Do you easily get frightened?		X		
Are you acting without thinking?			X	
Do you not care about things?		X		
Are you acting out in play?		X		

Score:

Never = 1 ; Sometimes = 2, Often = 3 ; Always = 4

Questionnaire 1 - Child
Before the child will follow the BAP - Method

Name of the child:	<div style="background-color: black; width: 100px; height: 1.2em; display: inline-block;"></div>	C
Sex of the child:	female	
Age of the child:	11	
Date:		

Emotion level	Never	Sometimes	Often	Always
Are you sad?		X		
Do you feel guilty?	X			
Do you feel scared?			X	
Do you feel lonely?			X	
Do you feel helpless?		X		
Do you feel angry?				X
Do you feel dull and sluggish?		X		
Do you have worries?			X	

Thinking level	Never	Sometimes	Often	Always
Do you mistrust others?		X	X	
Are you confused?				X
Do you have problems with concentration?				X
Do you lose control?		X		
Do you have to remember bad situations all over sudden				X
Do you forget things?			X	

Body level	Never	Sometimes	Often	Always
Do you feel sick?		X		
Do you have problems to breath?			X	
Do you have little energy?			X	
Do you feel tired?				X
Do you shake?			X	
Is your heart beating fast?				X
Do you feel pain in your body?			X	
Are you less hungry?	X			

Behavior level	Never	Sometimes	Often	Always
Do you have problems to sleep?				X
Do you have nightmares?				X
Do you prefer playing alone?		X	X	
Do you cry?			X	
Do you feel restless?			X	
Do you pee in your bed?	X			
Do you easily get frightened?		X		
Are you acting without thinking?				X
Do you not care about things?			X	
Are you acting out in play?		X		

Questionnaire 2- Teacher
After the child followed the BAP - Method

Name of the teacher:	
Number of lessons with the child per week:	
Name of the child:	(D)
Sex of the child:	female
Age of the child:	10
Date:	Term 03/2013

Instructions:

Questions are related to the behavior and appearance of the child in class.
Can you observe the following qualities with this child? In which scale? Please fill in:

1 = never; 2 =sometimes; 3=often; 4=always

Emotion level	1	2	3	4
Sadness		✓		
Anxiety		✓		
Helplessness		✓		
Anger			✓	
Inactivity			✓	

Thinking level	1	2	3	4
Confusion		✓		
Concentration problems				✓
Loss of control			✓	
Blackouts	✓			

Body level	1	2	3	4
Energy shortfall	✓			
Tiredness	✓			
Tremble	✓			
Loss of appetite	✓			

Behavior level	1	2	3	4
Social retreat		✓		
Crying	✓			
Apathy		✓		
Hectic			✓	
Stutter	✓			
Aggressiveness			✓	
Startle		✓		
Impulsivity			✓	
Lethargy		✓		

Signature Teacher:

[Redacted Signature]

Questionnaire 2 - Child
After the child followed the BAP - Method



Name of the child:	[REDACTED]
Sex of the child:	female
Age of the child:	10
Date:	

Emotion level	Never	Sometimes	Often	Always
Are you sad?		X		
Do you feel guilty?	X			
Do you feel scared?		X		
Do you feel lonely?	X			
Do you feel helpless?	X			
Do you feel angry		X		
Do you feel dull and sluggish?		X		
Do you have worries?		X		

Thinking level	Never	Sometimes	Often	Always
Do you mistrust others?		X		
Are you confused?		X		
Do you have problems with concentration?		X		
Do you lose control?	X			
Do you have to remember bad situations all over sudden	X			
Do you forget things?		X		

Body level	Never	Sometimes	Often	Always
Do you feel sick?			X	
Do you have problems to breath?		X		
Do you have little energy?	X			
Do you feel tired?		X		
Do you shake?	X			
Is your heart beating fast?	X			
Do you feel pain in your body?		X		
Are you less hungry?	X			

Behavior level	Never	Sometimes	Often	Always
Do you have problems to sleep?		X		
Do you have nightmares?	X			
Do you prefer playing alone?	X			
Do you cry?		X		
Do you feel restless?			X	
Do you pee in your bed?	X			
Do you easily get frightened?		X		
Are you acting without thinking?		X		
Do you not care about things?		X		
Are you acting out in play?	X			

Score:
Never = 1 ; Sometimes = 2, Often = 3 ; Always = 4

Questionnaire 1 - Child
Before the child will follow the BAP - Method

Name of the child:		①
Sex of the child:	female	
Age of the child:	10	
Date:		

Emotion level	Never	Sometimes	Often	Always
Are you sad?		X		
Do you feel guilty?	X			
Do you feel scared?			X	
Do you feel lonely?	X			
Do you feel helpless?	X			
Do you feel angry			X	
Do you feel dull and sluggish?		X		
Do you have worries?		X		

Thinking level	Never	Sometimes	Often	Always
Do you mistrust others?		X	X	
Are you confused?		X		
Do you have problems with concentration?				X
Do you lose control?		X		
Do you have to remember bad situations all over sudden	X			
Do you forget things?		X		

Body level	Never	Sometimes	Often	Always
Do you feel sick?				X
Do you have problems to breath?			X	
Do you have little energy?	X			
Do you feel tired?		X		
Do you shake?	X			
Is your heart beating fast?		X		
Do you feel pain in your body?		X		
Are you less hungry?		X		

Behavior level	Never	Sometimes	Often	Always
Do you have problems to sleep?		X		
Do you have nightmares?	X			
Do you prefer playing alone?		X		X
Do you cry?		X		
Do you feel restless?				X
Do you pee in your bed?	X			
Do you easily get frightened?		X		
Are you acting without thinking?		X		
Do you not care about things?		X		
Are you acting out in play?		X		

Questionnaire 2- Teacher
After the child followed the BAP – Method

Name of the teacher:	[REDACTED]
Number of lessons with the child per week:	
Name of the child:	[REDACTED] (E)
Sex of the child:	female
Age of the child:	12
Date:	Term 03/2013

Instructions:

Questions are related to the behavior and appearance of the child in class.
Can you observe the following qualities with this child? In which scale? Please fill in:

1 = never; 2 =sometimes; 3=often; 4=always

Emotion level	1	2	3	4
Sadness	✓			
Anxiety		✓		
Helplessness		✓		
Anger	✓			
Inactivity			✓	

Thinking level	1	2	3	4
Confusion		✓		
Concentration problems			✓	
Loss of control	✓			
Blackouts	✓			

Body level	1	2	3	4
Energy shortfall	✓			
Tiredness	✓			
Tremble	✓			
Loss of appetite	✓			

Behavior level	1	2	3	4
Social retreat		✓		
Crying	✓			
Apathy	✓			
Hectic	✓			
Stutter	✓			
Aggressiveness	✓			
Startle	✓			
Impulsivity	✓			
Lethargy		✓		

Signature Teacher: [REDACTED]

Questionnaire 2 - Child
After the child followed the BAP - Method

CA

Name of the child:	
Sex of the child:	female
Age of the child:	11
Date:	

Emotion level	Never	Sometimes	Often	Always
Are you sad?			X	
Do you feel guilty?	X			
Do you feel scared?			X	
Do you feel lonely?		X		
Do you feel helpless?		X		
Do you feel angry		X		
Do you feel dull and sluggish?	X			
Do you have worries?		X		

Thinking level	Never	Sometimes	Often	Always
Do you mistrust others?			X	
Are you confused?		X		
Do you have problems with concentration?			X	
Do you lose control?	X			
Do you have to remember bad situations all over sudden	X			
Do you forget things?		X		

Body level	Never	Sometimes	Often	Always
Do you feel sick?		X		
Do you have problems to breath?	X			
Do you have little energy?		X		
Do you feel tired?		X		
Do you shake?	X			
Is your heart beating fast?		X		
Do you feel pain in your body?	X			
Are you less hungry?	X			

Behavior level	Never	Sometimes	Often	Always
Do you have problems to sleep?		X		
Do you have nightmares?		X		
Do you prefer playing alone?			X	
Do you cry?	X			
Do you feel restless?	X			
Do you pee in your bed?	X			
Do you easily get frightened?	X			
Are you acting without thinking?		X		
Do you not care about things?		X		
Are you acting out in play?	X			

Score:
Never = 1 ; Sometimes = 2, Often = 3 ; Always = 4

Questionnaire 1 - Child
Before the child will follow the BAP - Method

Name of the child:		(E)
Sex of the child:	female	
Age of the child:	11	
Date:		

Emotion level	Never	Sometimes	Often	Always
Are you sad?				X
Do you feel guilty?	X			
Do you feel scared?			X	
Do you feel lonely?		X		
Do you feel helpless?		✓		
Do you feel angry			X	
Do you feel dull and sluggish?		X		
Do you have worries?			X	

Thinking level	Never	Sometimes	Often	Always
Do you mistrust others?			X	
Are you confused?			X	
Do you have problems with concentration?				X
Do you lose control?	X			
Do you have to remember bad situations all over sudden		X		
Do you forget things?	X			

Body level	Never	Sometimes	Often	Always
Do you feel sick?		X		
Do you have problems to breath?	X			
Do you have little energy?			X	
Do you feel tired?			X	
Do you shake?	X			
Is your heart beating fast?		X		
Do you feel pain in your body?		X		
Are you less hungry?	X			

Behavior level	Never	Sometimes	Often	Always
Do you have problems to sleep?			X	
Do you have nightmares?		X		
Do you prefer playing alone?			X	
Do you cry?		X		
Do you feel restless?	X			
Do you pee in your bed?	X			
Do you easily get frightened?		X		
Are you acting without thinking?		X		
Do you not care about things?			X	
Are you acting out in play?	X			

Questionnaire 2- Teacher
After the child followed the BAP - Method

Name of the teacher:	[REDACTED]
Number of lessons with the child per week:	
Name of the child:	[REDACTED] (FA)
Sex of the child:	female
Age of the child:	10
Date:	Term 03/2013

Instructions:

Questions are related to the behavior and appearance of the child in class.
Can you observe the following qualities with this child? In which scale? Please fill in:

1 = never; 2 =sometimes; 3=often; 4=always

Emotion level	1	2	3	4
Sadness		✓		
Anxiety		✓		
Helplessness		✓		
Anger		✓		
Inactivity			✓	

Thinking level	1	2	3	4
Confusion		✓		
Concentration problems			✓	
Loss of control		✓		
Blackouts	✓			

Body level	1	2	3	4
Energy shortfall		✓		
Tiredness		✓		
Tremble	✓			
Loss of appetite	✓			

Behavior level	1	2	3	4
Social retreat		✓		
Crying		✓		
Apathy		✓		
Hectic			✓	
Stutter	✓			
Aggressiveness		✓		
Startle		✓		
Impulsivity			✓	
Lethargy			✓	

Signature Teacher:

[REDACTED]

Questionnaire 1 – Teacher
Before the child will follow the BAP – Method

Name of the teacher:	[REDACTED]
Number of lessons with the child per week:	
Name of the child:	[REDACTED] (7A)
Sex of the child:	female
Age of the child:	10
Date:	

Instructions:

Questions are related to the behavior and appearance of the child in class.
Can you observe the following qualities with this child? In which scale? Please fill in:

1 = never; 2 = sometimes; 3 = often; 4 = always

Emotion level	1	2	3	4
Sadness			X	
Anxiety		X		
Helplessness				X
Anger		X		
Inactivity				X

Thinking level	1	2	3	4
Confusion				X
Concentration problems				X
Loss of control				X
Blackouts				X

Body level	1	2	3	4
Energy shortfall			X	
Tiredness			X	
Tremble	X			
Loss of appetite		X		

Behavior level	1	2	3	4
Social retreat				X
Crying			X	
Apathy		X		
Hectic			X	
Stutter	X			
Aggressiveness			X	
Startle			X	
Impulsivity				X
Lethargy				X

Signature teacher: [REDACTED]

Questionnaire 2 - Child
After the child followed the BAP - Method

FA

Name of the child:	
Sex of the child:	female
Age of the child:	10
Date:	

Emotion level	Never	Sometimes	Often	Always
Are you sad?		X		
Do you feel guilty?	X			
Do you feel scared?		X		
Do you feel lonely?	X			
Do you feel helpless?		X		
Do you feel angry	X			
Do you feel dull and sluggish?	X			
Do you have worries?		X		

Thinking level	Never	Sometimes	Often	Always
Do you mistrust others?		X		
Are you confused?		X		
Do you have problems with concentration?		X		
Do you lose control?	X			
Do you have to remember bad situations all over sudden		X		
Do you forget things?		X		

Body level	Never	Sometimes	Often	Always
Do you feel sick?	X			
Do you have problems to breath?	X			
Do you have little energy?		X		
Do you feel tired?		X		
Do you shake?	X			
Is your heart beating fast?		X		
Do you feel pain in your body?	X			
Are you less hungry?	X			

Behavior level	Never	Sometimes	Often	Always
Do you have problems to sleep?		X		
Do you have nightmares?		X		
Do you prefer playing alone?	X			
Do you cry?		X		
Do you feel restless?	X			
Do you pee in your bed?	X			
Do you easily get frightened?	X			
Are you acting without thinking?		X		
Do you not care about things?		X		
Are you acting out in play?	X			

Score:
Never = 1 ; Sometimes = 2, Often = 3 ; Always = 4

Questionnaire 1 - Child
Before the child will follow the BAP - Method

Name of the child:		(F)
Sex of the child:	female	
Age of the child:	10	
Date:		

Emotion level	Never	Sometimes	Often	Always
Are you sad?		X		
Do you feel guilty?	X			
Do you feel scared?		X		
Do you feel lonely?		X		
Do you feel helpless?				X
Do you feel angry		X		
Do you feel dull and sluggish?			X	
Do you have worries?		X		

Thinking level	Never	Sometimes	Often	Always
Do you mistrust others?		X	X	
Are you confused?			X	
Do you have problems with concentration?		X		
Do you lose control?		X		
Do you have to remember bad situations all over sudden		X		
Do you forget things?		X		

Body level	Never	Sometimes	Often	Always
Do you feel sick?		X		
Do you have problems to breath?	X			
Do you have little energy?		X		
Do you feel tired?			X	
Do you shake?	X			
Is your heart beating fast?		X		
Do you feel pain in your body?		X		
Are you less hungry?		X		

Behavior level	Never	Sometimes	Often	Always
Do you have problems to sleep?			X	
Do you have nightmares?		X		
Do you prefer playing alone?	X			X
Do you cry?		X		
Do you feel restless?		X		
Do you pee in your bed?	X			
Do you easily get frightened?	X			
Are you acting without thinking?		X		
Do you not care about things?		X		
Are you acting out in play?		X		

Questionnaire 1 – Teacher
Before the child will follow the BAP – Method

Name of the teacher:	
Number of lessons with the child per week:	
Name of the child:	(6A)
Sex of the child:	female
Age of the child:	11
Date:	

Instructions:

Questions are related to the behavior and appearance of the child in class.
Can you observe the following qualities with this child? In which scale? Please fill in:

1 = never; 2 = sometimes; 3 = often; 4 = always

Emotion level	1	2	3	4
Sadness			X	
Anxiety		✓		
Helplessness			X	
Anger	X			
Inactivity		X		

Thinking level	1	2	3	4
Confusion			X	
Concentration problems		X		
Loss of control		✓		
Blackouts		X		

Body level	1	2	3	4
Energy shortfall		X		
Tiredness		X		
Tremble	✓			
Loss of appetite	X			

Behavior level	1	2	3	4
Social retreat			X	
Crying	X			
Apathy		X		
Hectic	X			
Stutter	X			
Aggressiveness	X			
Startle	X			
Impulsivity		X		
Lethargy		X		

Signature teacher: _____

Questionnaire 2- Teacher
After the child followed the BAP - Method

Name of the teacher:	[REDACTED]
Number of lessons with the child per week:	
Name of the child:	Melissa Moses (GA)
Sex of the child:	female
Age of the child:	11
Date:	Term 03/2013

Instructions:

Questions are related to the behavior and appearance of the child in class.
Can you observe the following qualities with this child? In which scale? Please fill in:

1 = never; 2 =sometimes; 3=often; 4=always

Emotion level	1	2	3	4
Sadness			✓	
Anxiety		✓		
Helplessness		✓		
Anger	✓			
Inactivity		✓		

Thinking level	1	2	3	4
Confusion		✓		
Concentration problems		✓		
Loss of control	✓			
Blackouts	✓			

Body level	1	2	3	4
Energy shortfall		✓		
Tiredness		✓		
Tremble	✓			
Loss of appetite	✓			

Behavior level	1	2	3	4
Social retreat			✓	
Crying		✓		
Apathy		✓		
Hectic	✓			
Stutter	✓			
Aggressiveness	✓			
Startle		✓		
Impulsivity	✓			
Lethargy		✓		

Signature Teacher:

[REDACTED]

Questionnaire 2 - Child
After the child followed the BAP - Method

GA

Name of the child:		
Sex of the child:	female	
Age of the child:	11	
Date:		

Emotion level	Never	Sometimes	Often	Always
Are you sad?		X		
Do you feel guilty?		X		
Do you feel scared?		X		
Do you feel lonely?	X			
Do you feel helpless?		X		
Do you feel angry	X			
Do you feel dull and sluggish?		X		
Do you have worries?	X			

Thinking level	Never	Sometimes	Often	Always
Do you mistrust others?			X	
Are you confused?		X		
Do you have problems with concentration?	X			
Do you lose control?		X		
Do you have to remember bad situations all over sudden	X			
Do you forget things?			X	

Body level	Never	Sometimes	Often	Always
Do you feel sick?		X		
Do you have problems to breath?	X			
Do you have little energy?		X		
Do you feel tired?			X	
Do you shake?	X			
Is your heart beating fast?		X		
Do you feel pain in your body?			X	
Are you less hungry?	X			

Behavior level	Never	Sometimes	Often	Always
Do you have problems to sleep?		X		
Do you have nightmares?		X		
Do you prefer playing alone?			X	
Do you cry?		X		
Do you feel restless?			X	
Do you pee in your bed?	X			
Do you easily get frightened?		X		
Are you acting without thinking?	X			
Do you not care about things?		X		
Are you acting out in play?		X		

Score:

Never = 1 ; Sometimes = 2, Often = 3 ; Always = 4

Questionnaire 2- Teacher
After the child followed the BAP – Method

Name of the teacher:	[REDACTED]
Number of lessons with the child per week:	
Name of the child:	[REDACTED] (H)
Sex of the child:	male
Age of the child:	8
Date:	Term 03/2013

Instructions:

Questions are related to the behavior and appearance of the child in class.
Can you observe the following qualities with this child? In which scale? Please fill in:

1 = never; 2 =sometimes; 3=often; 4=always

Emotion level	1	2	3	4
Sadness			X	
Anxiety		X		
Helplessness			X	
Anger		X	X	
Inactivity		X		

Thinking level	1	2	3	4
Confusion			X	
Concentration problems		X		
Loss of control			X	
Blackouts	X			

Body level	1	2	3	4
Energy shortfall	X			
Tiredness	X			
Tremble		X		
Loss of appetite	X			

Behavior level	1	2	3	4
Social retreat		X		
Crying		X		
Apathy	X			
Hectic		X		
Stutter		X		
Aggressiveness			X	
Startle		X		
Impulsivity		X		
Lethargy	X			

Signature Teacher: [REDACTED]

Questionnaire 1 – Teacher
Before the child will follow the BAP – Method

Name of the teacher:	[REDACTED]
Number of lessons with the child per week:	
Name of the child:	[REDACTED] (HA)
Sex of the child:	male
Age of the child:	9
Date:	11.05.2013

Instructions:

Questions are related to the behavior and appearance of the child in class.

Can you observe the following qualities with this child? In which scale? Please fill in:

1 = never; 2 = sometimes; 3 = often; 4 = always

Emotion level	1	2	3	4
Sadness			X	
Anxiety			X	
Helplessness		X		
Anger				X
Inactivity	X			

Thinking level	1	2	3	4
Confusion		X		
Concentration problems		X		
Loss of control				X
Blackouts	X			

Body level	1	2	3	4
Energy shortfall		X		
Tiredness	X			
Tremble		X		
Loss of appetite	X			

Behavior level	1	2	3	4
Social retreat			X	
Crying			X	
Apathy	X			
Hectic		X		
Stutter	X			
Aggressiveness				X
Startle		X		
Impulsivity			X	
Lethargy	X			

Signature teacher:

[REDACTED]

Questionnaire 1 – Teacher
Before the child will follow the BAP – Method

Name of the teacher:	[REDACTED]
Number of lessons with the child per week:	
Name of the child:	[REDACTED] (HA)
Sex of the child:	male
Age of the child:	9
Date:	11.05.2013

Instructions:

Questions are related to the behavior and appearance of the child in class.

Can you observe the following qualities with this child? In which scale? Please fill in:

1 = never; 2 = sometimes; 3 = often; 4 = always

Emotion level	1	2	3	4
Sadness			X	
Anxiety			X	
Helplessness		X		
Anger				X
Inactivity	X			

Thinking level	1	2	3	4
Confusion		X		
Concentration problems		X		
Loss of control				X
Blackouts	X			

Body level	1	2	3	4
Energy shortfall		X		
Tiredness	X			
Tremble		X		
Loss of appetite	X			

Behavior level	1	2	3	4
Social retreat			X	
Crying			X	
Apathy	X			
Hectic		X		
Stutter	X			
Aggressiveness				X
Startle		X		
Impulsivity			X	
Lethargy	X			

Signature teacher:

[REDACTED]

Questionnaire 1 - Child
Before the child will follow the BAP - Method

Name of the child:	<div style="background-color: black; width: 100%; height: 1.2em;"></div>	<div style="border: 1px solid black; border-radius: 50%; width: 20px; height: 20px; display: flex; align-items: center; justify-content: center;">42</div>
Sex of the child:	male	
Age of the child:	9	
Date:		

Emotion level	Never	Sometimes	Often	Always
Are you sad?		X		
Do you feel guilty?	X			
Do you feel scared?		X		
Do you feel lonely?		X		
Do you feel helpless?				X
Do you feel angry		X		
Do you feel dull and sluggish?	X			
Do you have worries?			X	

Thinking level	Never	Sometimes	Often	Always
Do you mistrust others?				X
Are you confused?		X		
Do you have problems with concentration?		X		
Do you lose control?	X			
Do you have to remember bad situations all over sudden	X			
Do you forget things?		X		

Body level	Never	Sometimes	Often	Always
Do you feel sick?	X			
Do you have problems to breath?		X		
Do you have little energy?	X			
Do you feel tired?		X		
Do you shake?				X
Is your heart beating fast?		X		
Do you feel pain in your body?			X	
Are you less hungry?	X			

Behavior level	Never	Sometimes	Often	Always
Do you have problems to sleep?				X
Do you have nightmares?		X		
Do you prefer playing alone?		X		
Do you cry?		X		
Do you feel restless?			X	
Do you pee in your bed?	X			
Do you easily get frightened?		X		
Are you acting without thinking?	X			
Do you not care about things?		X		
Are you acting out in play?	X			

Appendix 7

All results Questionnaire 1&2 – Child Before & after the child followed the BAP – Method

Introduction:

16 children = 100% , 15 children = 93,75% , 14 children = 87,5% , 13 children = 81,25%, 12 children = 75% ,
11 children = 68,75%, 10 children = 62,5%, 9 children = 56,25%, 8 children = 50% , 7 children = 43,75%,
6 children = 37,5% , 5 children = 31,25%, 4 children = 25%, 3 children = 18,75% , 2 children = 12,5% , 1 child = 6,25%

Emotion level	Never		Sometimes		Often		Always	
	Q1	Q2	Q1	Q2	Q1	Q2	Q1	Q2
Are you sad?	18,75%	12,5%	68,75%	81,25%	6,25%	6,25%	6,25%	0%
Do you feel guilty?	62,5%	68,75%	18,75%	31,25%	18,75%	0%	0%	0%
Do you feel scared?	18,75%	31,25%	37,5%	37,5%	31,35%	31,25%	12,5%	0%
Do you feel lonely?	25%	50%	56,25%	50%	18,75%	0%	0%	0%
Do you feel helpless?	25%	43,75%	37,5%	56,25%	18,75%	0%	18,75%	0%
Do you feel angry	6,25%	31,25%	43,75%	50%	31,25%	18,75%	0%	0%
Do you feel dull and sluggish?	31,25%	81,25%	50%	18,75%	18,75%	0%	0%	0%
Do you have worries?	18,75%	31,25%	31,25%	50%	31,25%	18,75%	18,75%	0%

Thinking level	Never		Sometimes		Often		Always	
	Q1	Q2	Q1	Q2	Q1	Q2	Q1	Q2
Do you mistrust others?	12,5%	12,5%	31,25%	56,25%	31,25%	31,25%	25%	0%
Are you confused?	6,25%	6,25%	62,5%	87,5%	25%	6,25%	6,25%	0%
Do you have problems with concentration?	12,5%	18,75%	31,25%	62,5%	25%	18,75%	31,25%	0%
Do you lose control?	31,25%	62,5%	56,25%	37,5%	6,25%	0%	6,25%	0%
Do you have Flashbacks?	25%	50%	31,25%	25%	31,25%	25%	12,5%	0%
Do you forget things?	25%	25%	37,5%	56,25%	12,5%	18,75%	25%	0%

Body level	Never		Sometimes		Often		Always	
	Q1	Q2	Q1	Q2	Q1	Q2	Q1	Q2
Do you feel sick?	37,5%	50%	43,75%	37,5%	6,25%	12,5%	12,5%	0%
Do you have problems to breath?	62,5%	75%	18,75%	12,5%	18,75%	12,5%	0%	0%
Do you have little energy?	37,5%	31,25%	31,25%	62,5%	25%	0%	6,25%	6,25%
Do you feel tired?	62,5%	6,25%	43,75%	75%	31,25%	18,75%	18,75%	0%
Do you shake?	50%	68,75%	18,75%	25%	18,75%	6,25%	12,5%	0%
Is your heart beating fast?	25%	37,5%	56,25%	62,5%	12,5%	0%	6,25%	0%
Do you feel pain in your body?	25%	50%	37,5%	25%	18,75%	18,75%	18,75%	6,25%
Are you less hungry?	37,5%	68,75%	56,25%	31,25%	0%	0%	6,25%	0%

Behavior level	Never		Sometimes		Often		Always	
	Q1	Q2	Q1	Q2	Q1	Q2	Q1	Q2
Do you have problems to sleep?	18,75%	37,5%	37,5%	50%	18,75%	12,5%	25%	0%
Do you have nightmares?	12,5%	25%	56,25%	56,25%	12,5%	12,5%	18,75%	6,25%
Do you prefer playing alone?	31,25%	56,25%	43,75%	31,25%	18,75%	12,5%	6,25%	0%
Do you cry?	12,5%	31,25%	62,5%	62,5%	25%	6,25%	0%	0%
Do you feel restless?	25%	50%	37,5%	25%	25%	25%	12,5%	0%
Do you pee in your bed?	81,25%	87,5%	18,75%	12,5%	0%	0%	0%	0%
Do you easily get frightened?	18,75%	25%	50%	68,75%	18,75%	6,25%	12,5%	0%
Are you acting without thinking?	6,25%	25%	68,75%	50%	12,5%	25%	12,5%	0%
Do you not care about things?	31,25%	37,5%	50%	62,5%	12,5%	0%	6,25%	0%
Are you acting out in play?	18,75%	50%	43,75%	50%	18,75%	0%	18,75%	0%

Appendix 8

All results Questionnaire 1&2 – Teacher Before & after the child followed the BAP – Method

Introduction:

16 children = 100% , 15 children = 93,75% , 14 children = 87,5% , 13 children = 81,25%, 12 children = 75% ,
11 children = 68,75%, 10 children = 62,5%, 9 children = 56,25%, 8 children = 50% , 7 children = 43,75%,
6 children = 37,5% , 5 children = 31,25%, 4 children = 25%, 3 children = 18,75% , 2 children = 12,5% ,
1 child = 6,25%

Emotion level	Never		Sometimes		Often		Always	
	Q1	Q2	Q1	Q2	Q1	Q2	Q1	Q2
Sadness	18,75%	31,25%	31,25%	43,75%	43,75%	25%	6,25%	0%
Anxiety	12,5%	18,75%	43,75%	68,75%	43,75%	12,5%	0%	0%
Helplessness	6,25%	18,75%	50%	56,25%	37,5%	25%	6,25%	0%
Anger	25%	25%	18,75%	43,75%	31,25%	31,25%	25%	0%
Inactivity	12,5%	6,25%	31,25%	43,75%	37,5%	50%	18,75%	0%

Thinking level	Never		Sometimes		Often		Always	
	Q1	Q2	Q1	Q2	Q1	Q2	Q1	Q2
Confusion	18,75%	6,25%	12,5%	56,25%	50%	25%	18,75%	12,5%
Concentration problems	0%	37,5%	12,5%	37,5%	43,75%	50%	43,75%	12,5%
Loss of control	6,25%	31,25%	43,75%	31,25%	18,75%	37,5%	31,25%	0%
Blackouts	68,75%	6,25%	18,75%	6,25%	6,25%	0%	6,25%	0%

Body level	Never		Sometimes		Often		Always	
	Q1	Q2	Q1	Q2	Q1	Q2	Q1	Q2
Energy shortfall	18,75%	37,5%	50%	62,5%	25%	0%	6,25%	0%
Tiredness	12,5%	37,5%	43,75%	62,5%	37,5%	0%	6,25%	0%
Tremble	81,25%	68,75%	12,5%	31,25%	6,25%	0%	0%	0%
Loss of appetite	68,75%	93,75%	31,25%	6,25%	0%	0%	0%	0%

Behavior level	Never		Sometimes		Often		Always	
	Q1	Q2	Q1	Q2	Q1	Q2	Q1	Q2
Social retreat	31,25%	31,25%	31,25%	62,5%	18,75%	6,25%	18,75%	0%
Crying	37,5%	56,25%	37,5%	37,5%	25%	6,25%	0%	0%
Apathy	25%	50%	62,5%	43,75%	12,5%	6,25%	0%	0%
Hectic	31,25%	50%	31,25%	25%	25%	18,75%	12,5%	6,25%
Stutter	81,25%	75%	6,25%	18,75%	12,5%	6,25%	0%	0%
Aggressiveness	31,25%	25%	12,5%	31,25%	25%	37,5%	31,25%	6,25%
Startle	37,5%	37,5%	25%	56,25%	37,5%	6,25%	0%	0%
Impulsivity	0%	12,5%	37,5%	37,5%	43,75%	37,5%	18,75%	12,5%
Lethargy	25%	25%	31,25%	50%	31,25%	25%	12,5%	0%

Appendix 9

Posttraumatic Stress Disorder DSM5

The new DSM-5 (American Psychiatric Association, 2013). Below are the diagnostic criteria for Post Traumatic Stress Disorder according to the DSM-5 (American Psychiatric Association, 2013).

Posttraumatic Stress Disorder

Diagnostic criteria

309.81 (F43.10)

Note: The following criteria apply to adults, adolescents, and children older than 6 years. For children 6 years and younger, see corresponding criteria below.

A. Exposure to actual or threatened death, serious injury, or sexual violence in one (or more) of the following ways:

1. Directly experiencing the traumatic event(s).
2. Witnessing, in person, the event(s) as it occurred to others.
3. Learning that the traumatic event(s) occurred to a close family member or close friend, the event(s) must have been violent or accidental.
4. Experiencing repeated or extreme exposure to aversive details of the traumatic event(s) (e.g. first responders collecting human remains; police officers repeatedly exposed to details of child abuse).

Note: Criterion A4 does not apply to exposure through electronic media, television, movies, or pictures, unless this exposure is work related.

B. Presence of one (or more) of the following intrusion symptoms associated with the traumatic event(s), beginning after the traumatic event(s) occurred:

1. Recurrent, involuntary, and intrusive distressing memories of the traumatic event(s).
Note: In children older than 6 years, repetitive play may occur in which themes or aspects of the traumatic event(s) are expressed.
2. Recurrent distressing dreams in which the content and/or affect of the dream are related to the traumatic event(s).
Note: In children, there may be frightening dreams without recognizable content.
3. Dissociative reactions (e.g. flashbacks) in which the individual feels or acts as if the traumatic event(s) were recurring. (Such reactions may occur on a continuum, with the most extreme expression being a complete loss of awareness of present surroundings.)
Note: In children, trauma-specific reenactment may occur in play.
4. Intense or prolonged psychological distress at exposure to internal or external cues that symbolize or resemble an aspect of the traumatic event(s).
5. Marked psychological reactions to internal or external cues that symbolize or resemble an aspect of the traumatic event(s).

C. Present avoidance of stimuli associated with the traumatic event(s), beginning after the traumatic event(s) occurred, as evidenced by one or both of the following:

1. Avoidance of or efforts to avoid distressing memories, thoughts, or feelings about or closely associated with the traumatic event(s).
2. Avoidance of or efforts to avoid external reminders (people, places, conversations, activities, objects, situations) that arouse

distressing memories, thoughts, or feelings about or closely associated with the traumatic event(s).

D. Negative alterations in cognitions and mood associated with the traumatic event(s) beginning or worsening after the traumatic event(s) occurred, as evidenced by two (or more) of the following:

1. Inability to remember an important aspect of the traumatic event(s) (typically due to dissociative amnesia and not to other factors such as head injury, alcohol, or drugs).
2. Persistent and exaggerated negative beliefs or expectations about oneself, others, or the world (e.g., 'I am bad,' 'No one can be trusted,' 'The world is completely dangerous,' 'my whole nervous system is permanently ruined').
3. Persistent, distorted cognitions about the cause or consequences of the traumatic event(s) that lead the individual to blame himself/herself or others.
4. Persistent negative emotional state (e.g., fear, horror, anger, guilt, or shame).
5. Markedly diminished interest or participation in significant activities.
6. Feelings of detachment or estrangement from others.
7. Persistent inability to experience positive emotions (e.g., inability to experience happiness, satisfaction, or loving feelings).

E. Marked alterations in arousal and reactivity associated with the traumatic event(s), beginning or worsening after the traumatic event(s) occurred, as evidenced by two (or more) of the following:

1. Irritable behavior and angry outbursts (with little or no provocation) typically expressed as verbal or physical aggression toward people or objects.
2. Reckless or self-destructive behavior.
3. Hypervigilance.
4. Exaggerated startle response.
5. Problems with concentration.
6. Sleep disturbance (e.g., difficulty falling or staying asleep or restless sleep).

F. Duration of the disturbance (Criteria B, C, D, and E) is more than 1 month.

G. The disturbance causes clinically significant distress or impairment in social, occupational, or other important areas of functioning.

H. The disturbance is not attributable to the physiological effects of a substance (e.g., medication, alcohol) or another medical condition.

Specify whether:

With dissociative symptoms: The individual's symptoms meet the criteria for post-traumatic stress disorder, and in addition, in response to the stressor, the individual experiences persistent or recurrent symptoms of either of the following:

1. **Depersonalization:** Persistent or recurrent experiences of feeling detached from and as if one were an outside observer of, one's mental processes or body (e.g., feeling as if one were in a dream; feeling a sense of unreality of self or body of time moving slowly).
2. **Derealization:** Persistent or recurrent experiences of unreality of surroundings (e.g., the world around the individual is experienced as unreal, dreamlike, distant or distorted).

Note: To use this subtype, the dissociative symptoms must not be attributable to the physiological effects of a substance (e.g., blackouts, behavior during alcohol intoxication) or another medical condition (e.g., complex partial seizures).

Specify if:

With delayed expression: If the full diagnostic criteria are not met until at least 6 months after the event (although the onset and expression of some symptoms may be immediate).

Posttraumatic Stress Disorder for Children 6 Years and Younger

- A. In children 6 years and younger, exposure to actual threatened death, serious injury, or sexual violence in one (or more) of the following ways:
1. Directly experiencing the traumatic event(s).
 2. Witnessing, in person, the event(s) as it occurred to others, especially primary care-givers.
- Note:** Witnessing does not include event(s) that are witnessed only in electronic media, television, movies, or pictures.
3. Learning that the traumatic event(s) occurred to a parent or caregiving figure.
- B. Presence of one (or more) of the following intrusion symptoms associated with the traumatic event(s), beginning after the traumatic event(s) occurred:
1. Recurrent, involuntary, and intrusive distressing memories of the traumatic event(s).
- Note:** Spontaneous and intrusive memories may not necessarily appear distressing and may be expressed as play reenactment.
2. Recurrent distressing dreams in which the content and/or affect of the dream are related to the traumatic event(s).
- Note:** It may not be possible to ascertain that the frightening content is related to the traumatic event.
3. Dissociative reactions (e.g. flashbacks) in which the child feels or acts as if the traumatic event(s) were recurring. (Such reactions may occur on a continuum, with the most extreme expression being a complete loss of awareness of present surroundings). Such trauma-specific reenactment may occur in play.
 4. Intense or prolonged psychological distress at exposure to internal or external cues that symbolize or resemble an aspect of the traumatic event(s).
 5. Marked physiological reactions to reminders of the traumatic event(s).
- C. One (or more) of the following symptoms, representing either persistent avoidance of stimuli associated with the traumatic event(s) or negative alterations in cognitions and mood associated with the traumatic event(s), must be present, beginning after the event(s) or worsening after the event(s).
- Persistent Avoidance of Stimuli**
1. Avoidance of or efforts to avoid activities, places, or physical reminders that arouse recollections of the traumatic event(s).
 2. Avoidance of or efforts to avoid people, conversations, or interpersonal situations that arouse recollections of the traumatic event(s).
- Negative Alterations in Cognitions**
3. Substantially increased frequency of negative emotional states (e.g., fear, guilt, sadness, shame, confusion).
 4. Markedly diminished interest or participation in significant activities, including constriction of play.
 5. Socially withdrawn behavior.
 6. Persistent reduction in expression of positive emotions.
- D. Alterations in arousal and reactivity associated with the traumatic event(s), beginning or worsening after the traumatic event(s) occurred, as evidenced by two (or more) of the following:
1. Irritable behavior and angry outbursts (with little or no provocation) typically expressed as verbal or physical aggression toward people or objects (including extreme tantrums).
 2. Hypervigilance.
 3. Exaggerated startle response.
 4. Problems with concentration.
 5. Sleep disturbance (e.g., difficulty falling or staying asleep or restless sleep).
- E. The duration of the disturbance is more than 1 month.
- F. The disturbance causes clinically significant distress or impairment in relationships with parents, siblings, peers, or other caregivers or with school behavior.
- G. The disturbance is not attributable to the physiological effects of a substance (e.g., medication or alcohol) or another medical condition.

Specify whether:

With dissociative symptoms: The individual's symptoms meet the criteria for post-traumatic stress disorder, and in addition, in response to the stressor, the individual experiences persistent or recurrent symptoms of either of the following:

1. **Depersonalization:** Persistent or recurrent experiences of feeling detached from and as if one were an outside observer of one's mental processes or body (e.g. feeling as if one were in a dream; feeling a sense of unreality of self or body or time moving slowly).
2. **Derealization:** Persistent or recurrent experiences of unreality of surroundings (e.g. the world around the individual is experienced as unreal, dreamlike, distant or distorted).

Note: To use this subtype, the dissociative symptoms must not be attributable to the physiological effects of a substance (e.g., blackouts) or another medical condition (e.g. complex partial seizures).

Specify if:

With delayed expression: If the full diagnostic criteria are not met until at least 6 months after the event (although the onset and expression of some symptoms may be immediate).

Appendix 10

Allocation of tasks

In order to write this Dissertation, the researchers had to accept different responsibilities of the research. Maïke Berentzen offered the therapy program of the BAP- method (drama) to 8 of the participants, while Viola Werner offered the program with the medium art to the other 8 participants. Both of the authors were responsible for letting their 8 participants and their teachers fill out the questionnaires. Both of the researchers were collecting relevant theories from diverse publications, to create the abbreviation and theoretical framework. Furthermore, Maïke was analyzing and calculating the results, while Viola was responsible for the English language and the structure. The whole report was worked over several times by both of the researchers.

Appendix 11 – Possible Drama and Art activities

Below you will find a short introduction in drama and art therapy and afterwards some examples on possible drama and art therapy activities which can be used within the BAP – method.

The BAP - Method

The BAP method was developed by Angela Katschke, art therapist and director of the Butterfly Art Project and it pictures the metamorphose from a caterpillar to a butterfly. This transformation is translated to therapy for traumatized children. The BAP- method uses the metamorphosis of the caterpillar to butterfly as a symbolic guide for the therapeutic process.

The BAP method includes eight sessions at 60 minutes in total. It is part of the BAP- method to fill out two questionnaires, one in the third session of the therapy and the second one after following the BAP – method. Questionnaire 1 serves a diagnostic instrument and makes clear what the individual problems, symptoms and questions of the clients are and helps to plan the further therapy in the choice of the activities for the individual problem of the child. Questionnaire 2 shows the development and change after following the BAP – method and shows if further therapy is needed.

Session 1 and 2 – The egg

The first session clearly distinguishes from the following sessions. Safety and introductions to the therapy room, the therapist and group members stand in the focus. The new situation, new people and new impressions can mean stress for the child, that's why it is important to be well prepared and to offer a clear structure to the client. The traumatized child experiences a safe and protected therapy room and starts to build trust and confidence.

In the second session, the children already know what to expect, so they experience less stress. It is still the aim to create a shelter and safe place for the clients by preparing a structured room and set everything up beforehand. Above all, in this stage it is very important to put the focus on building trust between client and therapist as well as between the members of the therapy group.

Session 3 – hatching

The child feels safe and starts to open up to the therapist and (if present) to the group. The child is confronted with its personal issues. This session is about searching for and finding the personal problems of the child. With the help of the therapist, children fill out the questionnaires by which the personal issues become clear and the client gets the chance to tell his/her story.

The therapist decides if the trust within the group is already big enough to fill out the questionnaires in the presence of the whole group or one-on-one with the therapist. Now, the child is confronted with its own feelings, behavior, physical and cognitive condition.

Session 4 -5, eating and growing

The client works on the goals, formulated during the third session. Depending on these goals, the therapist offers suitable medium- linked activities. The child learns, experiences, feels, grows, develops and is social. The child is strong in its own resources.

Session 6 – 7, the cocoon

Session 6 and 7 are about reflecting back on to what's learned in session 4 and 5. The child will gain insight on its own process of development. A review takes place on how the child came into therapy and which learning gains and changes the child has made. The child gets an insight on its personal development, progress and growth. If a child feels safe enough, a trauma-exposition can take place at this stage of therapy.

Session 8, the Butterfly

The clients have their farewell from therapy and celebrate the advantages they made in that time. The second questionnaire is completed with the help of the therapist. Afterwards, it is time for a farewell `celebration` and the therapist can decide if the child needs further treatment in the next term.

A session at BAP

Ideal Outcomes of Sessions:

Every therapy session is different depending on those involved and their needs.

A therapist, art or drama, is expected to get to know the clients during the first two sessions, these are the observation sessions. By the third session the therapist should know what they hope to achieve or what they need to work towards. The therapist will generally realize the expectations and needs of the child through questionnaires so that the method can be determined by the therapist for the fourth session.

Typical Outline of a Session:

1. Introduction – This time is intended to help the therapist to see how the children feeling emotionally. The therapist is also encouraged to support younger children through the use of “emotion cards.”

2. Preparation– The therapist is expected to prepare the clients for the rest of the session through a warm-up exercise that should loosen the children's muscles as well as engaging with

them through their imaginations. An example of one such activity is everyone introducing themselves and then miming something about themselves.

3. Central activity – The group will then explore their issues through different techniques decided by the therapist. For drama therapy this will be activities such as role-play while for art the children should explore things such as sculpting or painting.

4. End – The session should close with a de-brief of the group by talking through what the participants accomplished, input they may have as well as what their experience of the session was.

Possible Central Activities:

Drama Activities:

Activities include role playing, improvisation, miming, speech, movement, acting out experiences, using puppets and masks, play-therapy, Playback Theater and psychodrama. There are of course other methods, some of which are listed below with explanations.

Activity/method	Explanation
Warm up	Muscle-loosening exercises to help the children relax
Role-play	This a very common method used that allows the client to explore their feelings by, for example, playing a parent or child that will facilitate the exploration of emotions honestly in a certain situation.
Improvisation	This activity entails the actor to make up a scenario and dialogue or monologue in the moment.
Mime	Miming is acting through only body language which is solely responsible for creating the mood of the emotion or scenario without the use of speech.
Speech	This can involve the child speaking in a way in which they are not accustomed which can either involve the speaker changing their volume or describing their feelings through language.
Movement	This is similar to mime because it allows the child to express themselves through body movement which may result in dancing or an action expressing a certain emotion.
Acting out	This entails the participant to re-enact passed situations or behaviours that have been previously problematic. This is often difficult as the experience is relived but it helps for future experiences so that they may be better understood and handled.
Therapeutic storytelling	The storyteller is expected to help the listeners to shift into an altered state of consciousness through both verbal and physical cues such as sighs, stretches, changing of bodily positions and different postures which allow the listeners to experience and connect with the story.
Play-therapy	This sort of therapy is usually used in cases where the children are between 3 and 11 as it allows them to naturally explore the things that they feel and experience in a cohesive way that they can control which also helps the healing process. Children experience and learn a lot about

	social interaction through play which makes it an important form of therapy (counseling and/or psychotherapy) that determines the causes of disturbed behavior through the use of objects and toys. Willingness of interaction, social interaction, acceptance, growth and development.
Masks	Masks allow children to sort through their feelings but at a distance which helps them to be less afraid to explore different aspects of themselves. These can be created simply through different mediums and techniques. They should depict the children when they are experiencing different emotions, it is then suggested that participants share these emotions and their experiences with the group as well as how they react. These masks can also be used in role-playing exercises.
Puppets	Puppets are very effective while working with young children as they may be used in different ways such as gaining much of the child's attention which will help them to work through the process and possibly find solutions to problems. A variety of characters may be used so that the child can not only convey their story but they may also create their own puppets through different ways of creation that can be improvised or researched but things such as felt, socks, coloured pens, buttons and beads or crêpe paper and so on. These children with their puppets can be put into groups thereafter so that they may create and/or act out their own stories.

Art Activities:

Art activities are very versatile as therapists can use different techniques such as painting with various paints and on different surfaces, crayons/chalk, sculpting with clay, using other objects, drawing, and collage techniques. There are of course other methods, some of which are listed below with explanations.

Activity/method	Explanation
Painting	This is a very pure form of art which leaves much space for expression and exploration with much freedom. As the blank canvas can be off-putting, the therapist is expected to guide the participant by giving them activities and prompting the movements. Different colours, the vibrancy and consistency will assist in expressing different emotions or meanings. Whether or not painting has been previously experienced, the therapist is expected to bring new outlooks and techniques.
Crayons/chalk	These mediums allow one to blend and connect physically with the piece which makes it more interactive. This allows children to connect with innocent honesty while adults reconnect with their childhood. The therapist is expected to help with facilitation through the suggestion of techniques and so on.
Sculpting	Is most successful when using an easily manipulated material such as clay because emotions are easily expressed through a method of trial and error as well as the physical process being very therapeutic through the physical interaction. Different colours and hues can be used to stimulate the participants in different ways. There is a lot of

	freedom when it comes to all the different aspects of sculpture.
Found objects	Found objects may be very personal or simply picked up somewhere and may be used in the creation of a sculpture or a mixed medium piece on a flat surface. These found objects should be expressive of how the creator is feeling and the message that they wish to convey. Flower pressing is an example of a flat piece that may be a method explored.
Collage	This is a very simple exercise to convey one's feelings by cutting out or up pictures and words in order to sort through one's emotions. This gives the participant space to express themselves very freely through a mood or theme.
Working on a group project	A group project allows people interact with teams of people and develop communication skills through the sharing of creative ideas and experiences that are helpful to all.
Paint your dreams	Dreams are always very surreal and often senseless but expressing them through painting or drawing can help one to make sense of the symbolism's meaning. They also allow for very different forms of subject matter to be explored and expressed.