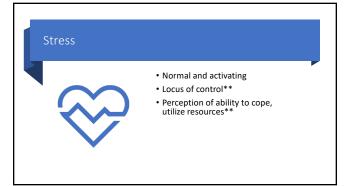
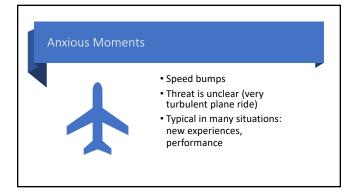


Tonics Covered

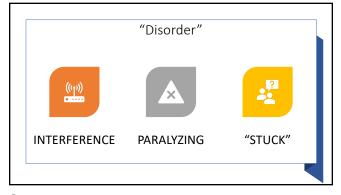
- Healthy stress vs. anxious moments vs. anxiety disorder
- Causes of anxiety
- Classroom demands that impact anxiety
- Anxiety impacting school functioning
- Interventions for managing anxiety
- Communicating with families
- Creating plans to manage anxiety

2









# Anxiety and Cavemen

- The world was a dangerous place
- When they left the safety of their caves, had to be "on the lookout"
- Main goal = survival



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# Fight or Flight or Freeze

- Temper tantrum
   Lash out (physically or verbally)
- Avoidance (i.e., bathroom, nurse, staying home)
- Escape (i.e., bathroom, nurse, office, hallway, locker)
- Freeze
  - Shut down
     Go blank

  - Withdraw

8

- Hypervigilant and misread cues = "False Alarms"
- Meets specific criteria
- Causes impairment in functioning (gets in the way of being a \_\_\_\_ year old)
- Patterns, consistency, duration

# Causes of Anxiety (Risk Factors)

- Genetics
- Wiring/Temperament
- Modeling/Social Learning
- Classical Conditioning
- Trauma
- Combination

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# Startle response Slow-to-warm up Introversion Behavioral inhibition Emotional reactivity Negative affectivity (neuroticism) Perseveration

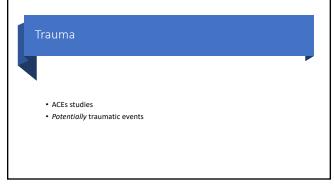
APA, 2013; Dragon & Dragon, 2014; Fox & Pine, 2013

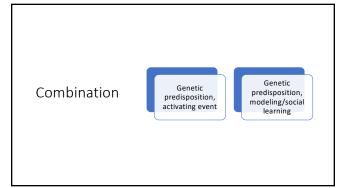
11

# Modeling/Social Learning

- Albert Bandura, 1977
- $\bullet\,$  Anxiety develops through learning that occurs from observing others
- Learn to avoid, no opportunity to test and invalidate
- Bees/spiders, math, dentists' offices, germs, etc

• Wat	on, 1920s			
	ng at whether emotio v's dogs)	nal responses co	uld be classica	lly condition (like
• Little	Albert			





### Is Anxiety on the Rise and Why?

- Qualitative data
- $\bullet\,$  Statistics seem to support increase, but unclear
- · Social media?
- · Increased pressures?
- "Helicopter" parents (or worse "Lawnmower" parents!)?
- Decreased stigma, increased diagnostic awareness

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# **Anxiety Disorders**

- Excessive fear (emotional response to real or perceived imminent threat)
- Excessive anxiety (anticipation of future threat)
- Related behavioral disturbances
- Specific disorders differ in the types of situations or objects that induce fear, anxiety, avoidance behavior, and cognitive ideation

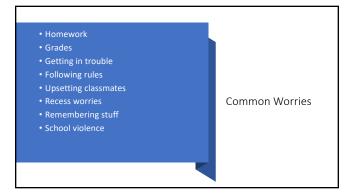
• DSM-V, 2013

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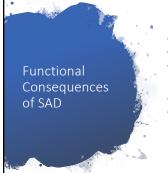




Completing homework in reasonable amount of time Trouble sleeping (reviewing day, anticipating next day) Attending in class Performance on tests Interacting with peers Behavior in school Behavior at home, afterschool	School Related Challenges
--	------------------------------



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- Limited independent activities
- School avoidance/refusal
- Even when "in" school, frequent attempts to be picked up/go home, have parent stay
- Not going away to college
- Stressors on parents (job absences, limited social life, sleep)



- Consistent failure to speak in specific social situations when there is an expectation for speaking (i.e., at school) despite speaking in other situations
- Interferes with educational or occupational achievement or with social communication
- Not attributable to lack of knowledge of, or comfort with, spoken language required
- Not better explained by a communication disorder and does not occur exclusively during ASD

- Participation in class
- Showing mastery, asking questions
- Social relationships
- Getting needs met (i.e., illness, bathroom, help with materials)
- Can be demanding of 1:1 attention from teachers
- Can be demanding of 1:1 attention from specific classmate

School Related Problems

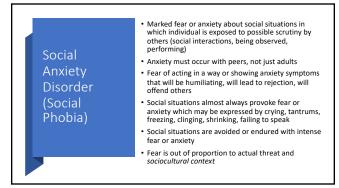
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- Marked fear or anxiety about a specific object or situation
- Fear or anxiety may be expressed by crying, tantrums, freezing, clinging
- Phobic object almost always provokes immediate fear or anxiety
- Active avoidance or endured with intense fear or anxiety
- Fear/anxiety disproportionate with actual danger

Animals (including insects, bees)
Common Phobias in School Children/Teens
Weather
Blood-injection-injury
Choking
Vomiting
Loud sounds
Costume characters

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Reading aloud
Participation in class discussion
Answering/asking questions
Eating, drinking during school hours
Interacting with peers (i.e., for social/leisure purposes or group work)
Presentations
Posted work, grades, behavioral standings
Attending in class
Taking tests, exams in group

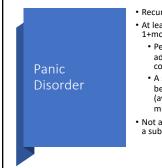
<ul> <li>Racing, pounding heart</li> </ul>
Sweating
Trembling, shaking
<ul> <li>Sensations of shortness of breath or smothering</li> </ul>
<ul> <li>Feelings of choking</li> </ul>
Chest pain, discomfort

- Nausea, abdominal distress
- Feeling dizzy, unsteady, light-headed or faint Chills or heat sensations
- Numbness or tingling
- Derealization (feelings of unreality) or depersonalization (being detached from self)
   Fear of losing control or "going crazy"
   Fear of dying

Panic Attacks

intense fear or intense discomfort that reaches a peak within minutes, and during which time

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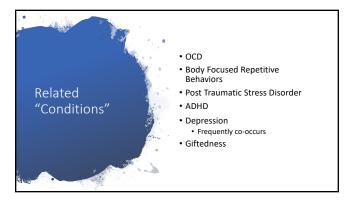


- Recurrent, unexpected panic attacks
- At least one panic attack is followed by 1+month of one or both:
  - Persistent concern or worry about additional panic attacks or their consequences
  - A significant maladaptive change in behavior related to the attacks (avoidance of behavior/situations that might trigger an attack)
- Not attributable by physiological effects of a substance or medical condition

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- Entering specific classrooms
- Entering specific areas in school (i.e., cafeteria, assemblies)
- Speaking in class, presenting
- Taking tests, exams in quiet room
- Attending in class

Related School Challenges

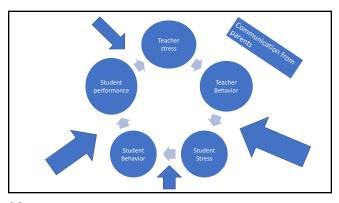


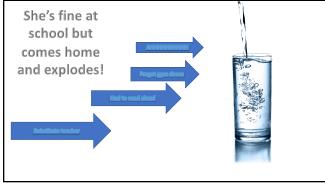


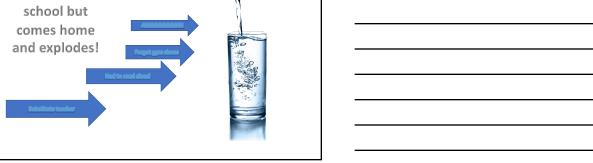
# Stress-Contagion Theories

- Oberle, Schonert-Reichl (2016): students' morning cortisol levels significantly varied between classrooms; teacher burnout significantly reduced the unexplained variability – suggests teachers' job related stress is linked to students' physiological stress regulation
- Chicken or the egg?

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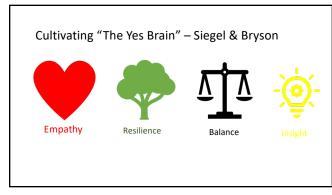




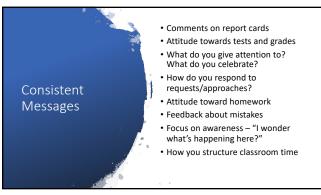


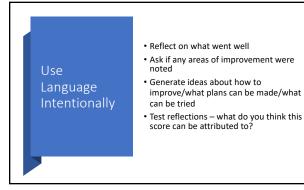


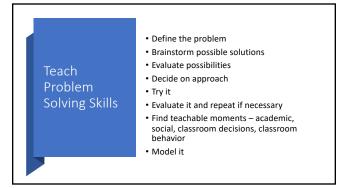




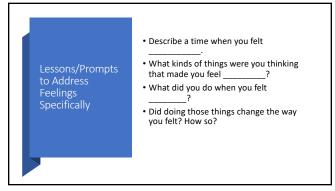


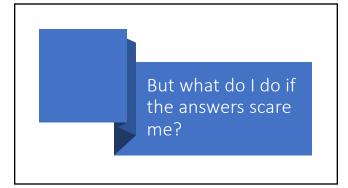




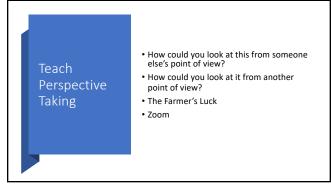




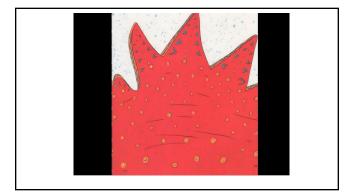














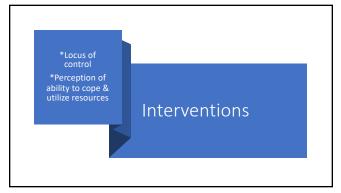


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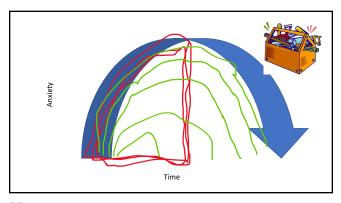
# Teach Emptying the Cup

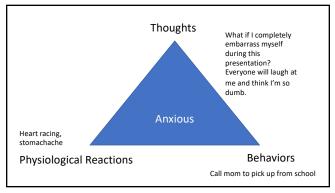
- Alexander and the Terrible, Horrible, No Good, Very Bad Day
- We all have to practice recognizing when our cups are getting full and how to empty them little by little
- Go wild with it!

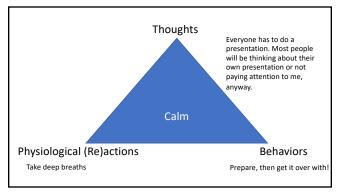




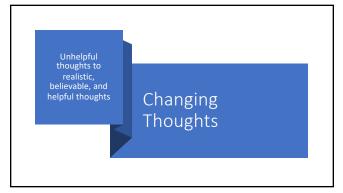


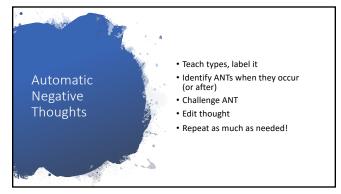


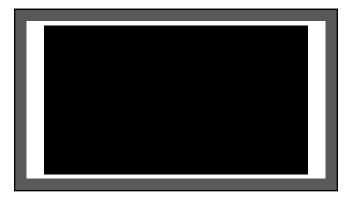


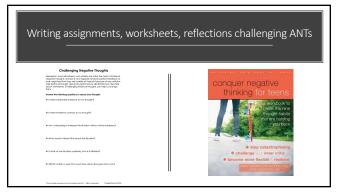




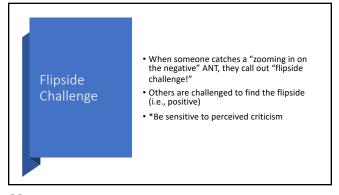


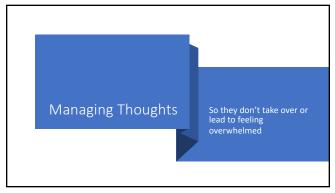












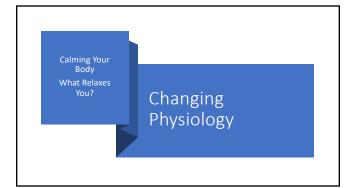
# Get Out Of Your Head and On Paper

- Index cards
- As fast as your thoughts come, dictate or write worry thoughts on index cards
- Once "all" thoughts are on cards, sort them
  - A thought I can edit
  - A problem to solve
  - A worry I'll probably have for awhile and I'll just come back to it later

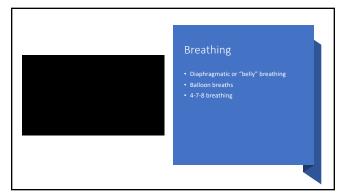
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# Create a "worry time" Any question can be asked, any worry thought can be discussed Outside of "worry time," do not give worries any attention Make worries wait - say to yourself, "ok, I'll think about that at worry time." You can write it down if you want and put it in a "worry box." Set a timer to review and sort worry thoughts Move on to something else If you don't need to fill up "worry time" going over worry thoughts, use it for something fun (at least for a little bit!)





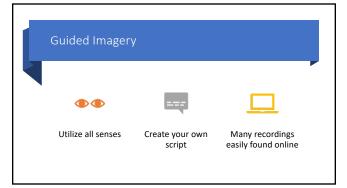




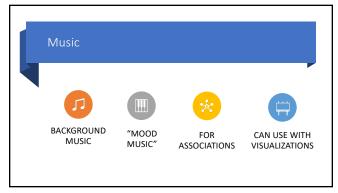


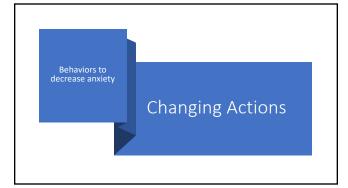






# Muscle Relaxation "Tense" and "relaxed" are mutually exclusive Progressive Muscle Relaxation: Train your muscles to tense and relax Scripts for young children Scripts for teens/adults Autogenic Muscle Relaxation: Train your muscles to relax "Letting Go"





# • 5-4-3-2-1: 5 things you see, 4 things you can touch, 3 things you can hear, 2 things you can smell, 1 thing you can taste • Name 5: fast food restaurants, bands you listen to, places you've visited, books you've read, etc.. • Math games: doubles, count backward • Recite something

### Break Behaviors

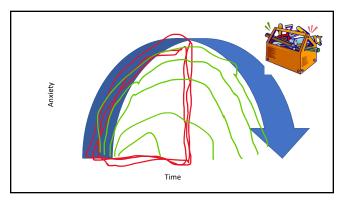
- Take a walk
- Go get a drink of water
- Sharpen a pencil
- Take a bathroom break
- Draw, scribble, doodle, color it in
- Read
- "Calm corner"

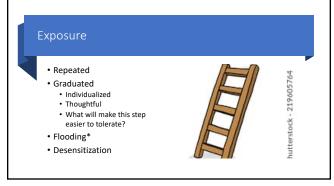
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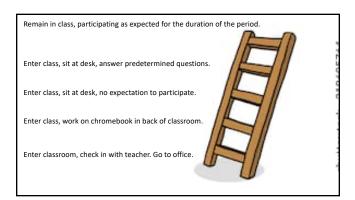


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### School Refusal

- Thorough assessment required!
- Teach student skills
- Teach parent skills
- Create graduated exposure plan
- Consider "abort" strategies...intentionally
- Put in as many supports as possible
- $\bullet$  If at home, structure like school day; consider secondary gain factors

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# Separation From Parents

- Parents should be educated and involved (i.e., who to drop off)
- $\bullet$  Student should be educated and involved (I feel better by the bell...)
- Create plan and prepare
- Build in transition (use objects, distractions, rewards)
- Build in resets if needed (objects, controlled check-ins, break)

### Selective Mutism

- $\bullet \ \, \text{Thorough assessment/understanding required}$
- Ask yes/no vs open ended questions
- Do not pressure, expect, or require speech/conversation
- Do not label as shy or quiet
- Find ways to increase comfort levels (i.e., preferred classmate, teacher, seating, access to coping tools)
- Careful desensitization or graduated exposure plan in coordination with mental health professional
- Plan for how to get needs met
- Be patient

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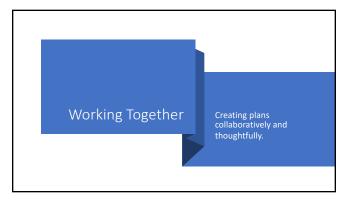
# OCD

- Connect with mental health provider who can begin CBT (likely will include ERP)
- Understand how OCD impacts school day/academics and vice versa
- Modify expectations if appropriate (thoughtfully and temporarily)
- Be willing to be a part of the plan

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# Panic Attacks

- Create a plan (often includes an escape route\*)
- $\bullet$  Increase comfort (i.e., preferred seating, access to water bottle, etc)
- Arrange for a signal if needed
- Allow access to utilizing coping tools





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- Avoid "rubber stamping"
- Think it through, does this make sense for this student in this setting at this time?
- Be open about potential obstacles, concerns
- Allow parents and student to share their obstacles, concerns
- What is our initial plan, how can we adjust and shape it to eventually reach long term goals?

