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Managing Anxiety & the Return to School
Webinar Series

Part 1: Identifying Anxiety and What to Do About It

Presented by:
Kendra Read, PhD, Seattle Children’s and University of Washington
Jennifer Blossom, PhD, University of Maine, Farmington

Disclaimer: The views, opinions, and content expressed in this presentation do not necessarily reflect the views, opinions, or policies of the Center for Mental Health Services (CMHS), the Substance Abuse and Mental Health Services Administration (SAMHSA), or the U.S. Department of Health and Human Services (HHS).
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Northwest MHTTC School Mental Health Team

Kelcey Schmitz, MSEd
Megan Lucy, BA
Nathaly Florez, BA
Eric Bruns, PhD

Our goals:

- Provide direct training and TA on the implementation of mental health services in schools
- Build infrastructure and create learning communities
- Support educational leaders to promote mental health for ALL

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Event Survey

• Required by our funder
• Used to inform, refine, & enhance future events/activities
• Helps communicate the need for this type of support
• Voluntary and anonymous
• Very important! We will end a few minutes early and ask that you please take a few moments to complete.
Presenters

**Kendra Read, PhD** is a clinical psychologist, the Director of the Mood & Anxiety Program and Director of Anxiety Programs at Seattle Children’s. She is also the Director of Psychotherapy Training through the University of Washington School of Medicine Child Psychiatry Fellowship. She received her PhD in clinical psychology from Temple University in Philadelphia, PA under the mentorship of Philip Kendall, Ph.D., completed her internship in pediatric psychology at Nemours/A.I. duPont Hospital for Children, and her postdoctoral fellowship at the Stanford University School of Medicine in the Psychiatry and Behavioral Sciences Department. Dr. Read specializes in the treatment of youth with anxiety disorders and OCD from a cognitive behavioral therapy perspective. Her research interests include understanding factors that contribute to treatment outcome, and the dissemination and implementation of CBT for anxiety disorders.

**Jennifer Blossom, PhD** is a Clinical Child Psychologist with expertise in assessment and intervention for youth with anxiety, depression, and suicidality. Currently, Dr. Blossom is an Assistant Professor in the Division of Psychology and Human Development at the University of Maine at Farmington (UMF), teaching at both the undergraduate and graduate levels. Before joining UMF, Dr. Blossom completed a two-year postdoctoral fellowship at Seattle Children’s/University of Washington where she conducted research and provided clinical services within the Mood and Anxiety Program and Crisis Care Clinic. Dr. Blossom maintains an active research program related to service delivery, efficiency, and access for youth with internalizing problems, with particular emphasis on expanding behavioral interventions within integrated healthcare settings.
Anxiety & School: Identifying Anxiety and What to Do About It

Kendra L. Read, PhD & Jennifer B. Blossom, PhD
Introductions

Kendra L. Read, PhD
• Director of Anxiety Programs, SCH
• Director of Mood & Anxiety Programs, SCH
• Expert in assessment and intervention for pediatric anxiety disorders

Jennifer B. Blossom, PhD
• Asst Professor of Psychology UMF
• Expert in pediatric anxiety & mood disorders
Disclosure Statement

• We do not have any conflict of interest, nor will we be discussing any off-label product use.

• This presentation has no commercial support or sponsorship, nor is it co-sponsored.
Objectives

• Identify how anxiety presents in educational settings.
• Learn empirically supported strategies to address problematic anxiety.
• Describe school-based approaches for anxiety that encourage and reinforce empirically supported strategies (approach vs. avoidance).
Anxiety: When is it a problem?

- Anxiety is normal, adaptive, and protective
  - Our bodies’ natural alarm system
- Anxiety is problematic when it causes significant distress or interferes in youth (or family) functioning
  - Goal: make the alarm less sensitive, don’t remove the batteries

<table>
<thead>
<tr>
<th>Developmental Stage</th>
<th>Common Fears/Worries</th>
</tr>
</thead>
<tbody>
<tr>
<td>Infancy</td>
<td>Loud noises, loss of support, heights, strangers, separation (in the present)</td>
</tr>
<tr>
<td>Preschool</td>
<td>Animals, the dark, storms, imaginary creatures, anticipatory anxiety</td>
</tr>
<tr>
<td>School-Aged</td>
<td>Specific realistic fears, school achievement, natural events</td>
</tr>
<tr>
<td>Older Children/Adolescents</td>
<td>Fear of fear (ability to think abstractly about fears), school performance, social competence, health</td>
</tr>
</tbody>
</table>
What does anxiety look like?

• **Avoidance**
  • Not speaking, reluctance to answer in class
  • Using the chat function instead of responding verbally

• **Somatic complaints – body reactions**
  • Frequent trips to the nurse, asks to go home, or complaints about illness that are unfounded
  • Missing class meetings because of aches & pains

• **Sleep and eating difficulties**
  • Eating less at school or avoiding the cafeteria

• **Excessive reassurance seeking**
  • Checking in about rules or due dates when they are typically remembered and followed by this student

• **Inattention, poor school performance**
What does anxiety look like?

• **School avoidance**
  • Episodes of or chronic absenteeism to avoid aversive experience at school
  • Showing up late to Zoom meetings
    • *Not turning on Zoom camera*
  • **Angry outbursts in effort to avoid**

• **What have you observed in your students?**
Causes and Maintenance of Anxiety

- Genes
- Temperament
  - Behavioral inhibition
- Social Learning
  - Reinforcement & Modeling
- Cognitive Factors
  - Biases in processing information
- Environmental/Life stressors
  - Not counting traumatic experiences
  - Youth with anxiety disorders do not commonly experience a related traumatic event that causes it
Cycles of Avoidance vs. Approach

**Cycle of Avoidance**
- Child encounters feared situation
- Child experiences anxiety
- Child avoids
- Adult/peer rescues
- Everyone’s anxiety is lowered
- Avoidance is reinforced

**Cycle of Approach**
- Child encounters feared situation
- Child experiences anxiety
- Child makes attempt to face/avoid situation
- Adult supports youth to face fear; they do not rescue or help avoid
- Anxiety lowers over time with success in brave steps
- Bravery is reinforced, interference is lowered
- Child experiences anxiety
- Everyone’s anxiety is lowered
- Avoidance is reinforced

The chart illustrates the cycle of avoidance and the cycle of approach, detailing how children encounter feared situations, experience anxiety, and either avoid or attempt to face them with support or reinforcement leading to lowered anxiety over time.
Treating Anxiety

Cognitive Behavioral Therapy (CBT)
• Most studied and empirically supported therapy

Medication
• SSRIs (e.g., Zoloft/sertraline; Lexapro/escitalopram)
• Not recommended that medication is the only line of treatment

CBT & Medication
• Youth who get both respond the best
• Consider adding meds to therapy when
• Presence of other disorder
• Partial response to therapy
Supporting Students with Anxiety

- Best practices – encourage approach vs. avoidance over time
- What can teachers do?
  - Work with families to identify goals, offer opportunities for exposures, and track progress
    - School to home note

![Image of a teacher and student]

Arabel

Validation + Confidence = Support
## School-to-Home Note

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<th>Name:</th>
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<td>Date:</td>
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<tr>
<th><strong>Goals</strong></th>
<th>Tracker</th>
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<td>2. Whisper to teacher 3x</td>
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<td>3. Raise hand during specials</td>
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</tbody>
</table>

**Total number of 😊:**

___ /12 = ____%

**Teacher’s initials/signature:**

**Additional comments:**

**Parent signature:**

**Home reward:**
Supporting Students with Anxiety

• Common pitfall: Tendency toward accommodation in formalized 504 plans/IEPs
  • Examples of contraindicated accommodations:
    • Extra time
    • Not calling on a student
    • Allowing avoidance of specific activities
  • Not bad but not helpful- not primary interventions
    • Relaxation strategies
    • Journaling

• Required- partnership from all parties (teachers, specialists)
  • We all have ownership and agency in this change even if you are not the “therapist”
FAQ

• How can I assess & support students who aren’t showing up for online sessions?

• How can I encourage participation for shy students or students who avoid speaking?

• How can students coping with anxiety deal with pressure to increase productivity during this time?

• What questions do you have?
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Thank you!

Join us for Part 2!
Managing Anxiety During COVID 19
October 7, 2020
1:00 pm – 2:30 pm Pacific Time

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