

ANXIETY AND SCHOOL ACCOMMODATIONS

COLORADO OCD & ANXIETY PROGRAM (COAP)

CHILDREN'S HOSPITAL COLORADO

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Anxious Student Behavior

- Frequent Bathroom Breaks
- Gives Presentations to Teachers 1:1
- Eats Lunch in Counselor's Office
- Frequent Nurse Visits / Picked Up Early
- Refusal to Attend Certain Classes
- Frequent Requests to Leave Early Due to Feeling Ill

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ANXIETY VS. ANXIETY DISORDERS

- Anxiety is a necessary, healthy component to being human
- Anxiety disorders = exaggerated anxiety to non-dangerous situations

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CYCLE OF AVOIDANCE: ANXIETY

Anxiety Level

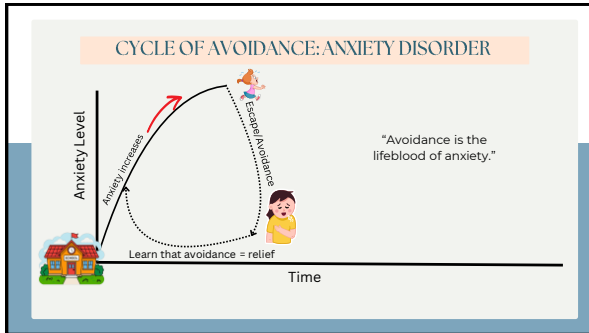
Time

Anxiety increases

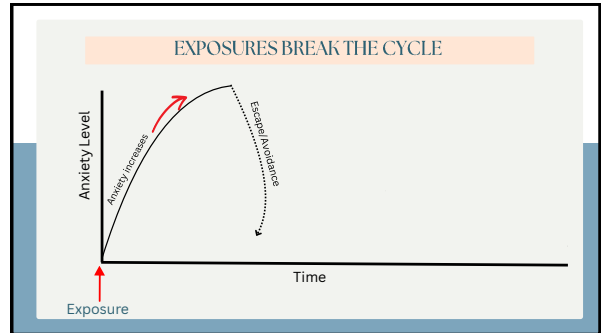
Learn that avoidance = safety

Anxiety decreases

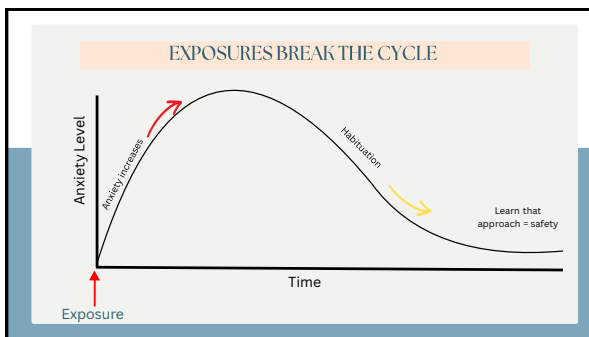
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OVERVIEW OF Exposure with Response Prevention

WHAT IS IT?

- CBT is the gold-standard for pediatric anxiety & OCD
 - Psychoeducation
 - Cognitive techniques
 - Anxiety management skills
 - Exposure with response prevention (ERP)

DOES IT WORK?

- 60% of children showed significant symptom decrease over 12-week
- Benefit was preserved 36-weeks post treatment

Reference: Hoge-McMillan et al., 2016; Pavuluri et al., 2014; Wallace et al., 2013

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OVERVIEW OF ERP

- Intentional approach of feared situations while withholding habitual avoidance behaviors
- Give patients emotional experience they work so hard to avoid
- Collaborative, planned, non-coercive
- Learn that the unwanted emotion (and context surrounding it) are safe and tolerable
- ERP is the element of treatment most strongly linked to improved outcomes

References: Perrin et al., 2010 & 2011; Whitson et al., 2020

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Treatment

Parent-Based Treatment as Efficacious as Cognitive-Behavioral Therapy for Childhood Anxiety: A Randomized Noninferiority Study of Supportive Parenting for Anxious Childhood Emotions

Eli R. Lebowitz, PhD, Carla Marin, PhD, Alyssa Martino, MS, Yara Shimabara, PhD, Wendy K. Silverman, PhD

Objective: Treatment for childhood anxiety disorders is insufficient in many cases. Parent involvement has been examined in augmenting child-based cognitive-behavioral therapy (CBT). This study tests whether the efficacy of child-based parent-based treatment is CBT. Research objectives: (a) the maintenance and course of childhood anxiety, (b) Supportive Parenting for Anxious Childhood Emotions (SPACE) is a parent-based treatment for children with anxiety disorders. This study compared SPACE to CBT in a randomized trial.

Method: Participants were children with primary anxiety disorder (N = 126, 7-11 years of age). 10% female participants, 80% white, randomly assigned to either SPACE (n = 63) or to child-based CBT (n = 63) with no parent involvement. A third CBT participant group (n = 63) completed all treatment sessions and assessments. Assessments did not differ significantly between groups. Therapy anxiety responses included diagnosis, severity and duration of visits, frequency sessions, school grades and child ratings of anxiety severity, health accommodations, and parenting stress. Noninferiority margin was determined based on minimal and clinical considerations. Change in health accommodations and parenting stress was measured using parent and teacher reports.

Results: SPACE was noninferior relative to CBT in primary and secondary outcome measures and had the largest positive effect on maintenance, parents, and children. Family accommodations and parenting stress were significantly reduced in both treatments, with significant greater reduction in family accommodations following SPACE compared to CBT. Treatment reliability and satisfaction were high.

Conclusions: SPACE is an acceptable and efficacious treatment for childhood anxiety disorders, is noninferior to CBT, and provides an alternative strategy for anxiety severity in children.

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ACCOMMODATIONS of Anxiety

(ACCOMMODATIONS OF ANXIETY-RELATED AVOIDANCE)

WHAT IS IT?

Behaviors that (intentionally or unintentionally) allow a child to avoid what they are afraid of

WHY DOES IT HAPPEN?

- To minimize suffering!
- Hard wired into parents
- Parents' own distress
- Used by 97% of parents of anxious children

Reference: Foa, 2023

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Examples of Accommodations

Separation Anxiety	Generalized Anxiety	Social Anxiety / Selective Mutism	OCD
Go with child everywhere	Providing reassurance	Asking teachers to not call on child in classroom	Providing extra soap
Child sleeps on mattress in parents' room	Answering questions repeatedly	Order at restaurants for child	Making separate food for every meal
Answering every phone call	Avoiding changes in routines	Constant use of mask & headphones	Refrain from touching "clean" objects
Turning on "find my" and taking photos of location	Avoiding certain topics of conversation	Move to online school	Arriving late to places while child completes ritual
Staying home from outings	Frequently picking up child early from school	Enroll child in ASL class	Make meals that do not require a knife

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ACCOMMODATIONS
of Anxiety

(ACCOMMODATIONS OF ANXIETY-RELATED AVOIDANCE)

REMEMBER!

- Accommodations come from a good place - but they do not actually help
- Accommodations remove the child's opportunity to build skills

Reference: Faye, 2022

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ACCOMMODATIONS
in Schools

School Accommodations for Anxiety

OBJECTIVE: To provide equitable access to learning and participation in activities, tailored to the individual's specific physical or learning needs.

IMPACT: Enhances the ability to participate and succeed in educational or social environments by accommodating specific needs, thereby **promoting independence and self-confidence.**

Adapted from University of Washington's Disabilities, Opportunities, Internetworking, and Technology

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ACCOMMODATIONS
in Schools

- Helpful accommodations help the child function independently
- Unhelpful accommodations allow the child to avoid what they are afraid of
- For anxiety accommodations, always have a plan to reduce and remove over time

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Examples of Accommodations in Schools

Paraprofessional attends all classes with student	Weighted blanket, "treats", etc in nurse's office
Spending unlimited time in nurse's office	Checking vitals in nurse's office
Texting parents throughout day	Avoiding changes in routines
Give 11 presentations to teacher instead of class	Unlimited bathroom breaks
Excused from group work	Parents picking up student early from school

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Alternatives to Accommodations

- Conduct brief check-ins and encourage return to class instead of calling home
- Keep the nurse's office minimally stimulating (least interesting environment)
- Resist "rescuing" behaviors; allow student to sit with feelings and recover
- Manage panic responses without excessive reassurance (e.g., vitals)
- Collaborate with counseling team to guide parent communication and set limits

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Anxiety or Actually Sick?

Patterns of avoidance

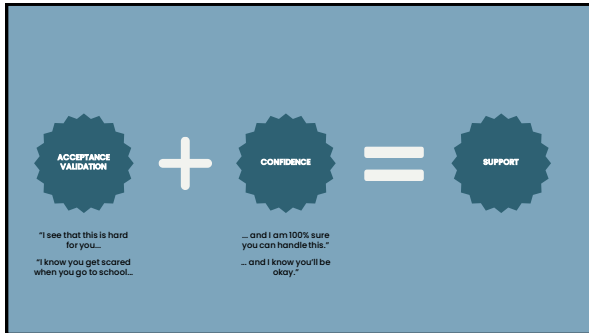
- Do symptoms occur before a "big" event?
- Do symptoms occur around the same time or day each week, or time of year?
- Does the student use coping skills, and then return to activity?

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REASSURANCE

- Purpose: To help! To calm a doubt or a worry when something is uncertain.
- Reassurance seeking is all about a desire for certainty. Uncertainty feels scary.

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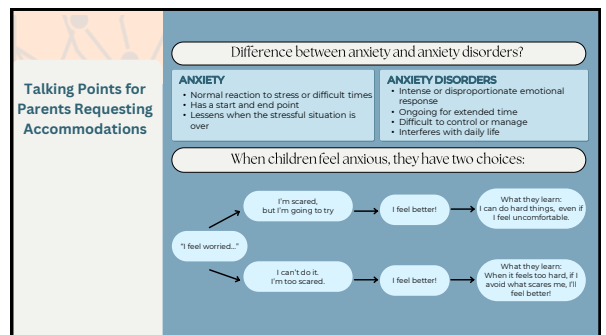
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CHECK IN			
Anxiety-Related Accommodation	Helpful	Unhelpful	New Accommodation to Support Distress Tolerance and Independence
Unlimited breaks when feeling anxious		X	<ul style="list-style-type: none"> 1 break per period/hour Stand in back of class Low-distraction fidgets/coloring
Leave class early to avoid hallways crowds		X	<ul style="list-style-type: none"> Having walking buddy (for set time period) Allow student to walk path before school starts (this year only)
Student eats lunch in counselor's office		X	<ul style="list-style-type: none"> Set number of days/week they can eat in office, plan to reduce over the year
Go to nurse when having panic attack	?	?	<ul style="list-style-type: none"> How often? What coping strategies do they engage in? Go back to class?

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CHECK IN			
Anxiety-Related Accommodation	Helpful	Unhelpful	New Accommodation to Support Distress Tolerance and Independence
Only using bathroom in nurse's office		X	<ul style="list-style-type: none"> Student can use any other school bathroom
Sit at desk next to teacher's desk	?	?	<ul style="list-style-type: none"> Great for ADHD. Not for anxiety. Child can sit at a desk near front, but not closer than other students
Wearing headphones	?	?	<ul style="list-style-type: none"> Great for Autism. Not for anxiety. Child can wear headphones during specific times (e.g., between classes)
Requests nurse to call home frequently to be picked up		X	<ul style="list-style-type: none"> Practice coping strategies to manage distress and direct back to class. Provide supportive responses.

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Talking Points for Parents Requesting Accommodations

Avoidance is the lifeblood of anxiety

WORRY
"I'm scared to do my presentation"

MORE AVOIDANCE
"Since staying home made me feel better, I'll do that again next time"

REINFORCEMENT
"The anxiety got better because I didn't go to school and do the presentation"

ESCAPE
"I'll stay home instead of doing it"

- We feel better when the anxious feeling is over, whether we do the scary thing or not
- Avoidance causes relief, and relief causes us to continue to choose avoidance, and the anxiety grows, and the cycle continues
- The key to managing anxiety is to break the cycle of avoidance by learning to tolerate discomfort, and approach the things that make us feel anxious
- We retrain our brains that scary is not the same as dangerous

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Talking Points for Parents Requesting Accommodations

Accommodations of Anxiety

- Anything a parent, sibling, teacher, etc. does to alleviate or prevent a child's worry/anxiety
- Behaviors that allow (intentionally or unintentionally) a child to avoid what they are afraid of

How do accommodations make child anxiety worse?

- When we jump in and accommodate, our actions tell the child that we agree that a situation is unsafe, and that we think they can't handle it
- Accommodations often make sense in the short term, but in the long term prevent children from learning that the feared situation is safe and that they can manage their anxiety on their own

What Can You Do Instead of Accommodate Anxiety?

- Ideally, decline accommodations of anxiety up front
- If accommodations are needed to get child to participate, always have a plan to reduce over time

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Thank You

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