Too Scared for School

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What do you notice at school?

- Behavioral
- Emotional
- Academic
- Peer and Social
- Medical and Health
Generalized Anxiety

- Somatic complaints
- Upset over changes
- Reassurance seeking
- Easily tearful
- Always on alert
- Difficulty concentrating
- “Teachers pet”
- Afraid to make waves
- Rigid
- Worried about rules and guidelines
- Worried about fairness
Separation Anxiety

- Somatic complaints
- School refusal
- Tearfulness during downtime
- Difficulties in the morning
- Wanting to call/contact parents
- Reluctance to go on field trips
Social Phobia

- Somatic complaints
- Won’t raise hand in class
- Avoid/refuse presentations/reading aloud
- Important to fit in completely
- Shyness out of proportion
- Watchful of other kids, but may not join
- Social skills that may not match the situation
- Few friends
- Avoidance
- Difficulty in lunch, gym class, more socially oriented activities
Panic Disorder

- Random vs. cued
- Increasing avoidance
- Abruptly leaving class or needing to leave urgently
- Looking acutely uncomfortable
- Specific somatic symptoms - rapid breathing, increased heart rate, shakiness, confusion, foggy thinking
- Acute fear of imminent danger
Selective Mutism

- Refusal to speak with teachers and/or peers
- Looking to others to speak for them
- Will remain quiet despite prompts/punishments
- Will do classwork, homework
School Refusal ???

- Where does school refusal fit in?
  - Actually not a diagnosis, but an indicator of other issues
    - Can be anxiety
    - Behavioral problems/family issues
    - Conduct disorders/truancy/drug and alcohol
    - Learning disorders
Universal Themes

- Hypersensitivity to perceived criticism
- Increased self criticism
- Misconception of social and environmental cues
- Somatic presentation
- Avoidance
Treatment Approaches
Provide Understanding

- Help child develop a basic understanding of anxiety
  - Basic psycho education – what anxiety is, why we get it, how they can work through it
  - Understanding that somatic complaints can be an outward sign of anxiety – isn’t necessarily “just in his/her head”
Basic Techniques

- **Modeling** – showing students how you might handle a similar situation
- **Tag along** – set up the problem and work through it together
- **Use of self** – anxiety is universal, allow them to see it around them
- **Third person** – if your cousin, best friend, sibling were going through this
- **Props** – depending on age
How to Help Them Identify Worried Thoughts

- Be creative
- Suggest possibilities
- Other children I work with...
- Multiple choice
- Use of humor
- Worst that can happen
- Non-anxious situations
- In the moment
Problem Solving Skills

- Typically see deficits in problem solving skills
- Teach a *method*
  - identify the problem
  - generate possible approaches
  - evaluate possible outcomes
  - test one out
Graduated Exposure

- Identify situations that cause anxiety
  - Easier for SAD, SP and Panic, more challenging for GAD
  - In vivo vs. imaginal
  - Begin to develop a hierarchy that they may feel comfortable with – collaboratively
  - Start very small – rack up some victories
- Role of coach
- Evaluate each one afterwards
- Continue to work up the scale
“Coping Scenario”

- Variations
  - The worst happens and you get through it
  - It goes well and you get through it
  - Neutral outcome

- Helpful techniques
  - Coping questions
  - Alternate possibilities
  - Looking for evidence

- Plan to tolerate physical symptoms
Exposure Ideas

- **Separation Anxiety** - having mom sit outside room, then gradual distance, mom at school but independent activities of child

- **Generalized Anxiety** - doing poorly on homework, approaching a teacher, forgetting a book, not knowing the directions, being separated from class on a field trip

- **Panic** - exposure to physical symptoms, increased heartbeat, feeling warm/cold, dizziness
Exposure Ideas

- **Panic** - exposure to physical symptoms, increased heartbeat, feeling warm/cold, dizziness
- **Social Phobia** - talking to a new kid, approaching a group, calling someone on the phone, talking to a teacher, practicing raising hand in class, practicing giving a presentation
- **PTSD** – really should not be done in school– think stabilization and referral.
- **Selective Mutism** – non-verbal communication, tandem play, single word answers, positive reinforcement
Family

- How much to involve the family?
- Likelihood of anxiety disorders in the family…
- Is the family facilitating the child’s anxiety?
- Psychoeducation for the family
- Treatment options
- The problems with facilitating avoidance
In Crisis

- Speak softly and slowly
  - Short, simple sentences
- Maintain distance
- Offer choices
- Keep it simple
- Basic skills – breathing, focus, calm
- Allow time – delay sense of urgency
Referral Information

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