C O M M E N T S

The ENHANCE Lab

Treating Anxiety Among Children and Adolescents with Autism and ADHD:

Updates from the Facing Your Fears Program

Owerko Centre Neurodevelopmental Clinical Rounds
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Land Acknowledgement

We would like to take this opportunity to acknowledge the traditional territories of the people of the Treaty 7 region in Southern Alberta which includes the Blackfoot Confederacy comprising:

- the Siksika, Piikani, and Kainai First Nations
- the Tsuut’ina First Nation
- and the Stoney Nakoda including the Chiniki, Bearspaw, and Wesley First Nations.

The City of Calgary is also home to Metis Nation of Alberta, Region III. The University of Calgary is situated on land adjacent to where the Bow River meets the Elbow River, and the traditional Blackfoot name of this place is Mohkinstsis, which we now call the City of Calgary.
Currently there is no single, universally-accepted way of describing autism.

There is mounting evidence that most autistic people prefer identity-first language (e.g., “autistic person”), highlighting that autism cannot be separated from the person and is an aspect of an individual’s identity that they may take pride in.

Identity-first language will be used throughout this presentation to acknowledge the preferences of most of the autistic community.

(Dwyer, 2022; Kenny et al., 2016)
Partners in this Research

Funders
• The Alberta Children's Hospital Foundation
• The Owerko Centre

Partners in Community
• Managers and Directors at CAAMHPP (AHS)
• Society for Autism Supports and Services (SASS)

Facilitators of FYF
• Kelley Drummond
• Heidi Cook
• Nicole Balerud
• Jerilyn Ninowski
• Alice Prichard
• Many many others

ENHANCE LAB Members
• Jessica Baraskewich
• Kailyn Turner
• Katie Hewitt
• Hangsel Sanguino
• Jasper Domondon
• Chris Clark
Overview of Presentation

1. **Background**
   - Anxiety in Autism
   - Impact of Anxiety

2. **Facing Your Fears**
   - About the Program
   - Program Adaptations
   - About the Research
   - Where We Are Now

3. **Preliminary Findings**
   - Effectiveness of FYF in Reducing Anxiety
   - Secondary Benefits of FYF

4. **Next Steps**
   - Future Directions
   - How to Refer Families
Background: Anxiety in Autism and its Impact
Background: Anxiety in Autism

• Mental health concerns among autistic children and adolescents is the norm rather than the exception
  • 70% of autistic adolescents experience mental health symptoms
  • 40-50% of autistic adolescents meet diagnostic criteria for 2 or more mental health conditions
  • Autistic individuals with co-occurring mental health conditions are more functionally impaired than individuals with mental health conditions alone
• 40% of autistic individuals are estimated to have an anxiety disorder
  • Compared to 3-8% of the general population

(Joshi, et al., 2010; Leyfer et al., 2006; Reaven & Wainer, 2015)
Background: Anxiety in Autism

- Anxiety often presents differently in autistic children and youth
- Kerns et al. (2014) proposed 2 types of anxiety disorders in autistic children and adolescents
  - 48% of youth were found to have typical anxiety disorders
  - 46% of youth displayed impairing symptoms of anxiety that were not consistent with DSM-5 psychological disorders, termed “distinct anxiety”
    - Fear of change
    - Idiosyncratic phobias
    - Negative reactions to change
    - Special interest fear
    - Other social fear
Background: The Impact of Anxiety

- 26 Caregivers (19 mothers and 7 fathers)
  - Of 20 autistic children and adolescents with clinically significant anxiety symptoms (8-14 years; $M = 10.90$, $SD = 2.02$)
  - Interviewed about the impact of their child’s anxiety on their child’s life, their family, and themselves
    - “Imagine your child was free from anxiety. How do you think their life would be different?”
Background: The Impact of Anxiety

If my child no longer had anxiety they would...

School Life
- Be more engaged in school
- Have less doubt in themselves and their performance
- Be in a mainstream classroom

Social Life
- Be less isolated
- Be able to pursue fulfilling relationships with others
- Be better able to function in a social environment

Emotional Well-being
- Be happier
- Experience less anger and emotional volatility

Physical Well-being
- Experience increased general health
- Sleep better
- Have fewer physical complaints
- Decrease their anxious habits and behaviours

(Howe et al., 2022)
“Focusing on the anxiety; focusing on what isn’t working in his life is a vicious cycle. He doesn’t feel happy but how can you when that’s what you’re focused on. Right? So, I just think he would be more naturally happy because he would be having positive experiences instead of focusing on what has gone wrong in the past that cannot be changed. There’s nothing there for him. But his fear of, you know, what’s happened in the past keeps him from having good experiences in the future.”

~ mother of 14-year-old male
Background: The Impact of Anxiety

If my child no longer had anxiety...

Family Activities
- We could go out more frequently and try a greater variety of activities
- We could enjoy family time that is more relaxed
- We would not have to accommodate the child’s anxiety

Caregiver Life
- I would be less stressed
- There would be a more peaceful family environment and better relationships between family members
- I would feel free to live my own life

(Howe et al., 2022)
Background: The Impact of Anxiety

“I started to cry because I was just so exhausted at that point... So, you have those moments where you hold it together and then you have those moments where it’s not so easy to hold it together because you’ve been holding it together for so long. It’s tough but you do what you have to do because it’s your child and you care about them and you love them, and you want what’s best for them, so you just have moments of weakness.”

~ mother of 10-year-old male

(Howe et al., 2022)
The Facing Your Fears Program
Facing Your Fears (FYF)

- **Manualized cognitive-behaviour therapy program** created by Judy Reaven and colleagues (2012)
- Created specifically for autistic children and adolescents with clinically-significant anxiety (8-14 years)
- **Duration of treatment:** 14 weeks – 1 ½ hour per session
- **Modality:** Group (4-5 families)
  - Large group work
  - Dyads
  - Children only
  - Parents only
Facing Your Fears (FYF)

Core Components of CBT
- Psychoeducation
- Somatic Management
- Cognitive restructuring
- Problem-solving strategies
- Graded exposure
- Relapse Prevention

Modifications
- Behaviour > Cognition
  - More concrete
- Emotion regulation (e.g., relaxation) training
- Greater use of written and visual information (e.g., schedule, worksheets)
- Involvement of caregiver
- Integrated social skills practice (e.g., show and tell)
Facing Your Fears (FYF)

Facilitators

- 3 recommended from various disciplines
  - Our groups have had 4+
- Complete 2-day training workshop
- Professionals with familiarity with CBT and/or autism
- Should include mental health professional, such as a psychologist, due to complexity of cases
Facing Your Fears (FYF) Schedule

• Sessions 1-4: Psychoeducation
  • Increase emotion vocabulary
  • Identifying feelings and intensity of anxiety
  • Limiting intensity and interference of anxiety
  • Challenging thoughts
  • Relaxation strategies

• Sessions 5-10: Graded Exposure
  • Identifying top worries and goals
  • Creating a fear hierarchy
  • Facing fears
    • In session with their caregiver and a group facilitator
    • At home
Facing Your Fears (FYF)

Parent Groups

- Psychoeducation about anxiety disorders and CBT
- Identifying children’s specific worries and symptoms
- Identifying target behaviours in preparation for graded exposure
- Discussing parental anxiety and parenting styles
- Discussing parent’s role as coaches and how they can support their children as they face their fears
Facing Your Fears (FYF)
Tools and Materials

Relaxation practice (e.g., deep breathing each session)

Worry bugs and helper bugs

Parent and child workbooks
Facing Your Fears (FYF)

Tools and Materials

- Stress-o-meter
- Reflection and self-evaluation
- Reinforcement
Facing Your Fears (FYF)
Video: Facing My Fear of Bugs
Facing Your Fears (FYF)

Adaptations

- FYF has previously been adapted for:
  - Adolescents (Reaven et al., 2012)
  - Autism + intellectual disability (Blakely-Smith et al., 2021)
  - Telehealth (Hepburn et al., 2016)
  - School settings (Drmic et al., 2017)
- Our team has adapted FYF for children and adolescents with ADHD
- We have also offered virtual groups during the COVID-19 pandemic
History of FYF in Calgary

- In total, we have had **10 FYF groups** since 2018
  - 6 in-person autism groups + 1 virtual
  - 2 in-person ADHD groups + 1 virtual
- In total, **46 families** have participated

**2018**
- 3 groups at CDC ($n = 14$)
- 2 group at SASS ($n = 6$)

**2019**
- 2 ADHD groups at Richmond Road ($n = 11$)
- 1 group at CDC ($n = 5$)

**2021**
- COVID-19 pandemic
  - 1 virtual autism group ($n = 5$)
  - 1 virtual ADHD group ($n = 5$)

In total, we have had 10 FYF groups since 2018.
Facing Your Fears (FYF)
Adaptations for ADHD

• 1-2 fewer sessions
• High facilitator ratios
• Movement breaks
• Video modeling very beneficial
• Psychoeducation with parents
  • About ADHD and anxiety
  • Discerning behaviour related to anxiety versus ADHD
Facing Your Fears (FYF)
Adaptation for Virtual Delivery during COVID-19

- 4 fewer sessions (10)
- Shorter sessions to maintain attention (1 hour)
- No child group
- Most activities completed at home
  - Exposures, videos

### Pros

| Supported families during a stressful time (COVID) - when services were cancelled | Less opportunity for social interaction and connect |
| Allowed for families from outside of Calgary limits to participate | More on parents to facilitate and work through exposures + behaviour management |
| Families did not have to worry about respite of other children and travel | Difficulties with maintaining attention |
| Seeing exposures happen in home/community through in-vivo exposures or videos submitted | Zoom fatigue |
Research Questions

THE ENHANCE LAB

How effective is FYF in reducing anxiety symptoms?

Does FYF lead to other positive gains (e.g., emotion regulation, social functioning, adaptive skills)?

Does a reduction in child anxiety impact family functioning (e.g., parent stress and mental health)?
FYF Research Project: Procedure

Prescreening
- Recruited through referrals from health practitioners or direct contact from families
- Phone interview to determine eligibility

**Time 1:** In-Person Assessment
- Confirmation of eligibility
- Assessment of anxiety symptoms
- Time 1 measures

**FYF Program (14 weeks)**
- 14 group sessions
- 1.5 hr./week

**Time 2:** Final Session
- Time 2 measures given during final group session
- May be completed at home and mailed to research team

**Time 3:** 6-Months Post-Intervention
- Participants invited back for a “data collection party”
- Time 3 measures given
### Child Outcomes

1. **Anxiety Symptom Severity and Improvement**
   - ADIS-ASA (parent interview)
   - SCARED (Child, Caregiver, and Teacher Reports)
   - CGI-I (Clinician Impression of Improvement)

2. **Other Mental Health Symptoms**
   - BASC-3 (Child, Caregiver, and Teacher Reports)

3. **Adaptive Functioning Skills**
   - ABAS-II (Caregiver Report)

4. **Quality of Life**
   - PedsQL (Child and Caregiver Reports)

5. **Executive Functioning**
   - BRIEF-2 (Caregiver and Teacher Reports)

6. **Emotion Regulation**
   - DERS (Child Self-Report)

### Caregiver and Family Outcomes

1. **Caregiver Mental Health**
   - PDSQ (Caregiver Self-Report)

2. **Caregiver Stress**
   - PSI-4 or SIPA (Caregiver Self-Report)

3. **Caregiver Social Support**
   - MOS Social Support Questionnaire (Caregiver Self-Report)

4. **Family Quality of Life**
   - Beach Centre FQOL Scale (Caregiver Report)

5. **Family Functioning**
   - Questionnaire of Family Functioning

### School Environment Outcomes

1. **Academic performance**
2. **Teacher’s comments on academic progress, engagement, and attendance**
Preliminary Findings
Preliminary Findings:
Demographic Information - Child/Youth

- **AGE**: 10.9 years (SD = 2.024)
- **SEX**: 70% of youth were male
- **RACE**: Most identified as White (80%)
- **MH Dx**: 70% had an anxiety disorder
Preliminary Findings:
Demographic Information - Caregiver

- **AGE**: 44.25 years (SD = 5.83)
- **FAMILY STATUS**: 70% had 2 biological parents
- **Family Income**: $100K or more
Preliminary Findings:
Changes in Anxiety – Autism Group

* Significant differences between all 3 time points (all p’s < .05)

* Significant differences between all T1 and T2; and T1 and T3 points (all p’s < .05)
Preliminary Findings: Changes in Child QoL – Autism Group

* Significant improvements in **child-rated QoL** seen at follow-up, *p* < .05

* Significant improvements in **parent-rated QoL** seen between T1 and T2, as well as T1 and T3, *p*'s < .05
Preliminary Findings: Changes in Family QoL – Both Groups

Significant improvements in family quality of life seen in both groups following participation; however, the improvements weren't seen at follow-up
Preliminary Findings:
Changes in PSI (stress) – Both Groups

Significant improvements in parent stress seen in both groups following participation, and these effects remain significant at follow-up (in the autism group)
Conclusions

- Participating in FYF was associated with:
  - Child-rated anxiety symptom (in autistic group)
  - Child quality of life (child and parent-rated)
  - Family quality of life (both groups)
  - Parental stress (both groups)
Next Steps For This Project

- Running 3 groups in Winter 2023 and 1 in Spring – all in person
- Adapting FYF for children and youth with FASD
- Continue to build capacity in community clinicians through training
How to Get Involved

Health Practitioners: Refer a Family
• Email enhancelab@ucalgary.ca to receive a copy of our referral form

Families
• Visit https://www.enhancekidshealth.com/facing-your-fears
• Enter your contact information to receive information about upcoming FYF groups

The FYF program has limited space and is typically offered four times a year.

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enhancekidshealth.com

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UNIVERSITY OF CALGARY WERKLUND SCHOOL OF EDUCATION

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Children’s Hospital RESEARCH INSTITUTE
Thank you for Listening!

Questions?

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References


