

ANXIETY

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Treating Fears and Phobias in Children with ASD

Final Installment in a Three-Part Series

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In the first article in this series I outlined three steps for treating fears and phobias. In the second, I described using these steps to treat specific concrete phobias such as getting shots. In this final article, I describe how to treat a child for the common fear of making mistakes. This example is illustrative of how to use this model for treating similar, more complex fears such as losing in games, being late, doing things out of order, fear of unexpected changes, or not being first.

Lilly's Fears

Lilly is a 12-year-old girl with ASD who gets extremely distressed when she makes mistakes and is corrected, especially in school work and most especially in math, a subject in which she performs well. She often becomes upset / worried in anticipation of possibly making a mistake and will put off or object to doing work in class or at home as a result. When she does make a mistake, and her teacher or parents correct her, she usually cries or shrieks and makes negative self-statements (e.g., "I'm horrible at everything!" or "You hate me!"), even though she is typically a happy, confident child who has close relationships with her parents and teachers. While Lilly has many other sources of anxiety, her school team and family decided to work on this problem together, since her fear of making mistakes was interfering so much with her wellbeing at home and at school, and with her relationships with peers.

Step 1: Figure out the components of the event the child fears.

Lilly's parents, teachers, and peers were not punitive regarding mistakes so her fear likely didn't come from them. Some children with this fear like having things in the right order and become distressed when things are mixed up, as is the case when mistakes are made; however, since Lilly didn't demonstrate this pattern of behavior it was unlikely that it

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was a component of her distress. On the other hand, Lilly had difficulty interpreting degrees of emotion in others which may have caused her to misinterpret small corrections by adults as indicating intense anger. In addition, like many children with ASD, Lilly also evidenced a tendency to think in black and white terms, and to process information in a manner associated with anxiety known as *catastrophizing* (believing things to be worse than they actually are). For example, when she was younger, if there was a small blemish on a paper or in a book she would become very upset. She may have felt that a mistake meant that her whole paper was ruined. Also, because of Lilly's black and white thinking and tendency to catastrophize, she may have viewed mistakes as indicative of abject failure. Her statements when she was distressed gave clues as to her feelings and thought process regarding making mistakes and being corrected. While such statements in some children may reflect overall low self-esteem or depression, this did not seem to be the case with Lilly as she only made derogatory statements after making mistakes or losing in games (another phobia trigger to work on next!).

As with most phobia triggers, Lilly also had anticipatory anxiety about school work due to worrying about the possibility of making mistakes; that is, she evidenced "fear of fear" (see Figure 1).

Step 2: Determine and use self- and/or co-regulation strategies.

What helped Lilly most to reduce her anxiety was to have playful "joking-around" times with her older sister and favorite



Figure 1. Components of Lilly’s Fear of Mistakes and Corrections

adults. Hence, the school-based team decided to find different ways of using interactive humor to work on each component of her fear. Lilly also loved to look at video clips of her favorite singers on the computer and, because she would do this as a calming activity when she was stressed, the team set out to find ways to use this strong interest in her treatment.

Step 3: Determine the techniques to use for gradually exposing the child to each of the components from Step 1, and then pair these with the anxiety-decreasing measures from Step 2.

The team directed Lilly’s teacher to make worksheets like those in her homework assignments but to label them, “UN-HOMEWORK,” something that Lilly would likely find funny. To help desensitize her to each component of her fear, the team decided to experiment by having her make mistakes on purpose on her un-homework worksheet. They also found some “blooper” video clips on the Internet in which one of her favorite performers makes mistakes. Finally, the team decided to incorporate use of *The Incredible 5-Point Scale* (Dunn Buron & Mitzi Beth, 2012) as a means of helping Lilly to better understand differences in degrees of emotion in adults when they were correcting her mistakes. It is important to note that Lilly had experienced success with this tool when applied to her own emotions at an earlier time.

The Desensitizing Process

Now the team was ready to combine gradual exposure to the components that caused the fear from Step 1 with the anti-anxiety measures from Step 2. This process is delineated below.

Lilly was very close to her speech language pathologist (SLP), and she did her homework with her mother, so the team decided to work through them. Her SLP, Ellen, quickly re-introduced the 5-Point Scale and used it interactively with Lilly and some

peers in a few group sessions. Ellen had the children first pick random words to say “at a 1” then “at a 5,” using the number system to indicate degrees of anger (e.g., “macaroni;” “seahorse”). Next, she had them say “correction” phrases such as, “Oops, you multiplied instead of divided,” at various levels of anger from neutral to very angry. To add humor and decrease anxiety, the SLP also used other emotion scales so that

the group also said random words and correction phrases in excited and scared levels too. Everyone, including Lilly, had fun with this game. Thus, amidst lots of laughter, Lilly slowly became desensitized to the use of correction phrases. Moreover, she also learned to distinguish the differing tones of voice and body language associated with the varying degrees of anger applied to the phrases. Importantly, if Lilly had shown signs of distress as the level of emotion increased vis-à-vis the correction phrases, Ellen would have *decreased* the exposure level by using more subtle and less apparent correction phrases (e.g., “Is that multiplication or division?”) before again trying more direct correction phrases.

Next, Lilly’s teacher and Ellen used the “un-homework” sheets to work on desensitizing her to small mistakes so that she would no longer view them as ruining whole pages. Ellen began by making small silly mistakes that Lilly would likely find funny, accompanying these with exaggerated pretend displays of acting as though all was ruined. For example, Ellen wrote a very simple math problem, $2+1 = _$, and then wrote in the correct number, backwards: $2+1 = \varepsilon$. Since this was not the kind of mistake that Lilly was apt to make, it was felt that she would probably interpret it as a “playful error.” Ellen then said, “Oh no! It’s backwards! It’s all ruined!” in a playfully “distressed” voice while using the phrases Lilly used when upset. “What am I going to do?” Lilly laughed and said, “That’s just backwards! Just erase it!” while handing Ellen the eraser. Lilly’s mother did this, as well, gradually using math problems that were more like those in Lilly’s real work while gradually making bigger mistakes. Lilly greatly enjoyed this, laughing gleefully as she “corrected” the adults’ initially silly and then bigger mistakes.

Her mother and Ellen also used this approach to address Lilly’s feelings of failure when she made a mistake. For example, they would make pretend mistakes and then react to them by

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using the language that Lilly would typically use: "Oh No!! I'm horrible at everything!" Lilly laughed as children often do when hearing adults express playfully exaggerated versions of their own feelings (Levine and Chedd, 2007), and quickly corrected them saying, "You are good at *many* things." This led to some discussions about what Lilly was good at. Periodically, the adults would go through the whole routine again making different "mistakes." It is important to note that had Lilly become upset during this process—as some children do when they hear their own words—the adults would have shifted to using more subtle, indirect language such as, "I made a terrible mistake!" and then adjusted their emotions and words to decrease her distress.

The goal in this approach to the desensitizing process is to capture the child's interest and help him or her to recognize the relationship between what the adult is doing and his or her own experience, free of distress. If the child is upset by what you

do, start with something more playful and less like the actual trigger, and add more anti-anxiety measures. If, however, the child doesn't seem to make the connection between what you are doing and the real event, gradually add more realism.

Finally, Lilly and her classmates also watched the funny "bloopers" video clips of the singers making mistakes. And, because she and her peers enjoyed this so much, it proved to be another very successful step in desensitizing Lilly to the experience of making mistakes.

The Real Thing

In class, Lilly's teacher sometimes prefaced making corrections by pointing out, "I'm not mad but ..." She also used the same type of humor that Ellen and Lilly's mother were using with her when she corrected Lilly and other students (e.g., "It's not an emergency, so no need to call an ambulance, but when I give you back your papers, we need to fix the problems that have correction marks next to them.") Within a few weeks Lilly's responses to making mistakes and being corrected were routinely mild, both in class and at home. And, as evidence of her progress, she no longer avoided her math homework but instead chose to start with it, recognizing that it was something she was good at. 📖

References

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BIO



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