

PositivelyAutism.com Newsletter

March 2014

Topic: Autism and Anxiety



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March Newsletter Topic: Autism and Anxiety

This month, we'll discuss anxiety among individuals with autism. According to the American Psychological Association, Anxiety is "an emotion characterized by feelings of tension, worried thoughts and physical changes like increased blood pressure." Since individuals with autism may experience heightened levels of anxiety, we'll be exploring this topic and sharing resources to help reduce anxiety.

Reference: American Psychological Association: <http://www.apa.org/topics/anxiety/>

Prevalence and Types of Anxiety in People with Autism

Individuals with autism may experience medical conditions and behavioral issues in addition to ASD. These conditions, known as "co-morbid" conditions, may include depressions, epilepsy, sleep disturbances, gastrointestinal (GI) problems, and anxiety.

According to research estimates, at least 30% of people with autism also have an anxiety disorder. Anxiety disorders co-morbid with autism may include phobias (including social phobia), separation anxiety, excessive worry, and obsessive compulsive disorder. As would be the case with anyone experiencing these issues, anxiety can be very difficult to manage for a person with autism.

Some research also indicates that adolescents and individuals who are "higher-functioning" on the spectrum may experience higher rates of anxiety disorders.

Among people on the spectrum, rates of anxiety can range from mild/occasional to severe enough to cause difficulty with daily functioning.

References:

Autism Speaks: Treatments for Associated Medical Conditions - <http://www.autismspeaks.org/what-autism/treatment/treatment-associated-medical-conditions>

Autism Speaks: Treatment for Associated Psychiatric Conditions - <http://www.autismspeaks.org/what-autism/treatment/treatment-associated-psychiatric-conditions>

The Sensory System and Anxiety

By PositivelyAutism.com

Although research suggests that people with autism may experience higher levels of anxiety compared to the general population, the reason isn't fully clear.

One theory considers the relationship between the sensory system and anxiety. As we know, many children with autism are hypersensitive to things such as noisy environments, visually over-stimulating environments, itchy seams or tags in clothing, and so on. Some evidence exists that anxiety is related to sensory hypersensitivity in children with autism. However, it is uncertain which one causes the other, or if they are causally related at all.

Sensory Hypersensitivity as a Possible Cause of Anxiety

It is possible that being hypersensitive to sensory stimuli may lead to anxiety. Let's say a child with autism has an unpleasant sensory reaction to loud noises, such as balloons popping. They may become anxious about the experience happening again, particularly in places associated with the stimuli, such as birthday parties (where balloons are commonly found).

If your child or student has a specific sensory experience that bothers him or her, you may be able to help reduce anxiety by making the experience less threatening. For example, if you know you will be attending a birthday party with balloons, your child might be able to wear ear plugs or listen to music. As another example, I had a student who hated the sound of sirens. When his class had a fire truck visit the school, we knew that the firefighters were going to turn on the siren during their presentation. I found out when they would be doing this and reassured my student that I would tell him when to cover his ears.

A child with autism may also have more general sensory reactions, such as any bright lights or loud noises being bothersome. This may cause more frequent anxiety because these stimuli are found in many places. In this case, anxiety can be more debilitating because it impacts the child more frequently and in more environments.

Sensory stimuli that are uncontrollable and unpredictable to the child or happen more frequently may cause the child to remain in a state of hypervigilance (constantly scanning the environment for potential threats). This may create a state of more constant anxiety.

Anxiety as a Possible Cause of Sensory Hypersensitivity

It is also possible that anxiety may lead to sensory issues, instead of the other way around. There is evidence to suggest that hyperarousal and hypervigilance are characteristic of anxiety disorders. Once a potential threat is observed in the environment, an individual with

an anxiety disorder may tend to obsessively focus on it, and have trouble thinking about other things. This could possibly contribute to sensory hypersensitivity. If an individual is constantly scanning the environment for potential threats, he or she may be more likely to notice unpleasant sensory stimuli in the environment.

If anxiety is a primary issue that leads to other issues, such as hypersensitivity, it makes sense to directly address the anxiety. Positively Autism's blog posts in the coming weeks will focus on interventions for anxiety in people with autism, such as cognitive behavior therapy.

Potential Limitations of the Theories

So which theory is correct? We don't know. Sensory hypersensitivity could be the cause, but a fear response does not automatically indicate the presence of an anxiety disorder. If anxiety is the cause, then why don't all individuals with autism and anxiety have hyperarousal or sensory hypersensitivity? It is also possible that anxiety and hypersensitivity are associated, but do not cause each other.

The Brain and Anxiety

It is possible that differences in the brain may also contribute to anxiety. The amygdala is the part of the brain that relates to arousal regulation and possibly social and emotional intelligence. Limbic system dysfunction and differences in the amygdala may both be present in individuals with autism and dysfunction in the limbic system is associated with the development of anxiety.

More research in all of these areas is needed before making more definite conclusions. Our next posts will continue to explore this topic and provide ideas on using this information.

References:

"The Development of Social Anxiety in Adolescents with Autism Spectrum Disorders" by Scott Bellini. [Focus on Autism and Other Developmental Disabilities](#). Volume 21, Number 3, Fall 2006.

"Anxiety Disorders and Sensory Over-Responsivity in Children with Autism Spectrum Disorders: Is There a Causal Relationship?" by Shulamite A. Green and Ayelet Ben-Sasson. [Journal of Autism and Developmental Disorders](#). Volume 40, 2010.

"Exploring the Nature and Function of Anxiety in Youth with Autism Spectrum Disorders" by Jeffrey J. Wood and Kenneth D. Gadow. [Clinical Psychology: Science and Practice](#). Volume 17, Issue 4, December 2010.

"Challenging Behaviors in Children with ASD" Video

This video describes how cognitive rigidity and abnormal regulation of attention and arousal can lead to many issues, including anxiety. View the video here: <http://positively-autism.blogspot.com/2014/03/challenging-behaviors-in-children-with.html>

The Relationship Between Social Experiences and Anxiety

As we've discussed in a previous post, the causes of anxiety in individuals with autism are currently unclear. Sensory hypersensitivity may be a contributing factor to anxiety development. Additionally, some theories suggest that difficulty with social situations may also play a role. This anxiety may interfere with the ability to form meaningful personal relationships, and also may contribute to isolation, depression, and substance abuse.

Social anxiety is characterized by a strong fear of social situations and/or performance situations (such as public speaking) where embarrassment may take place. Of course, plenty of people without autism may experience anxiety in such situations. People with anxiety severe enough to disrupt daily living may experience anxiety about only performance situations, but it is more problematic when an individual experiences both types of social anxiety. This is associated with a higher level of impairment, a longer duration of symptoms, and higher co-occurrence of other conditions, such as depression. Additionally, anxiety and worry can also hinder social performance because of the anxiety, creating a self-fulfilling prophecy. Among people with autism specifically, social avoidance and increased levels of repetitive behavior may also stem from social anxiety.

Social anxiety can result from negative experiences in social situations, such as confusion and unpredictability. Difficulties in social skills are one of the contributing factors, but peers may also play a role. When an individual experiences peer rejection and victimization, it may increase social anxiety. When individuals with autism are aware of their social differences, it may also lead to higher levels of anxiety.

Interventions for Social Anxiety

When working with children and adolescents with autism and social anxiety, one option is social skills instruction. Helping children understand the emotions and thoughts of others, as well as what is expected in various social situation can help make social experiences more predictable and less confusing. Social stories are a great tool for helping to explain social situations to people with autism.

However, social skills instruction should not be limited to the child or adolescent with autism. Autism awareness programs to educate peers without disabilities should also be considered. It is important for peers have a better understanding of their classmate with autism, as well as positive ways to interact with him/her. This may decrease peer rejection and victimization, reducing negative social experiences for the person with autism. Anti-bullying initiatives may fall into this category as well.

Another strategy is to help the person with autism learn strategies for relaxation and self-regulation. Check Positively Autism's upcoming blog posts for more information on these types of strategies. As a side note to this idea, many individuals with autism say that their "stimming" behavior, such as rocking and hand-flapping, help serve a self-regulatory and calming function. It may be beneficial to allow children and adolescents to use stimming as a "tool" to calm down when anxious. However, we must also realize that this is a coping response that does not address the root cause of the anxiety or stress. Digging a bit deeper

to teach the child to deal directly with the cause of the stressful situation may also be warranted.

All of the above issues should be discussed with your or your child's doctor, but particularly our next option. It is also possible that some medications, specifically SSRIs, may decrease anxiety in children with autism. Talk with your doctor before making any decision about whether medication is right for your child or yourself. Autism Speaks offers a free medication decision guide that you can use in conjunction with speaking with your doctor.

<http://www.autismspeaks.org/science/resources-programs/autism-treatment-network/tools-you-can-use/medication-guide>

References:

"The Development of Social Anxiety in Adolescents with Autism Spectrum Disorders" by Scott Bellini. [Focus on Autism and Other Developmental Disabilities](#). Volume 21, Number 3, Fall 2006.

"Anxiety Disorders and Sensory Over-Responsivity in Children with Autism Spectrum Disorders: Is There a Causal Relationship?" by Shulamite A. Green and Ayelet Ben-Sasson. [Journal of Autism and Developmental Disorders](#). Volume 40, 2010.

"Exploring the Nature and Function of Anxiety in Youth with Autism Spectrum Disorders" by Jeffrey J. Wood and Kenneth D. Gadow. [Clinical Psychology: Science and Practice](#). Volume 17, Issue 4, December 2010.

Anxiety Q and A's from Autism Speaks

Question: What behavioral therapies can help someone with autism and severe anxiety?
Answered by Jeffrey Wood, PhD, a psychologist at the University of California, Los Angeles.
<http://blog.autismspeaks.org/2012/02/24/what-behavioral-therapies-can-help-someone-with-autism-and-severe-anxiety/>

Question: My eight-year-old with autism rips his clothes when he gets nervous at school. How can I manage my son's anxiety?
Answered by Jeffrey Wood, PhD, a psychologist at the University of California, Los Angeles.
<http://www.autismspeaks.org/blog/2012/11/16/managing-anxiety-children-autism>

Question: How common are anxiety disorders in people with autism, and are there effective treatments?
Answered by Rob Ring, PhD, Autism Speaks vice president of translational research.
<http://blog.autismspeaks.org/2012/01/06/how-common-are-anxiety-disorders-in-people-with-autism-and-are-there-effective-treatments/>

Cognitive Behavior Therapy for Anxiety

By PositivelyAutism.com

You can listen to an audio recording of this article here: <https://www.youtube.com/watch?v=3wPoGeQwEt0>

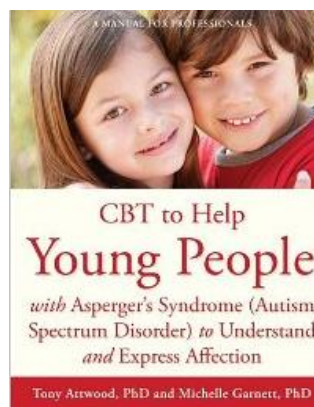
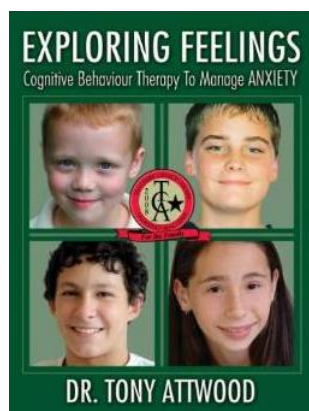
One possible treatment option for anxiety among people with autism is Cognitive Behavior Therapy, or CBT. CBT was initially developed to treat depression in the general population,

but is now being used to address additional needs. CBT focuses on changing negative and anxiety-producing thoughts and beliefs. CBT clients are taught to examine their emotions and thoughts, and recognize when negative emotions and thoughts are becoming more intense. They are also taught strategies to change their thinking, the premise being that this change in thought patterns can change the person's their behavior. CBT can be accompanied by other interventions including positive reinforcement and [social stories](#).

While there are various components of CBT, many programs include the following. Initially, the client may be assured that they are not to blame for their anxiety. Once this is established, the therapist and client come to a consensus about how the anxiety is causing problems for the client (such as social anxiety preventing a person from attending events of interest). This can provide a rationale and motivation for the CBT program.

The client and therapist work together to create a list of situations that produce anxiety for the client. This list is ordered from most to least anxiety-producing. The client is taught coping methods (such as relaxation techniques and logical, more positive thinking patterns about the anxiety-producing situations). At the same time, the client is gradually exposed to the anxiety producing situations, starting with the least anxiety-producing.

CBT may be somewhat more challenging for a person with autism due to difficulty identifying feelings and thought patterns. This may be challenging for the general population as well, but it may be more so for a person with autism. Some methods for making CBT more autism-friendly might include using visual aides, explaining complex social issues using social stories, allowing the person with autism to type their responses to therapist questions (or using online chat to ask questions), and incorporating the client's special interests into therapy sessions. More explanation and application of CBT for individuals with autism can be found in these resources from Tony Attwood:



According to the Autism Evidence-Based Practice Review Group at the Frank Porter Graham Child Development Institute at University of North Carolina at Chapel Hill, CBT meets the criteria as an evidence-based intervention. According to the research they evaluated, CBT has been effective for both elementary school and high school-age children with autism. They also report that CBT can be used to address communication, behavior, social, cognitive, adaptive, and mental health outcomes.

If you are interested in finding a cognitive behavior therapist, here are some tips:
http://abct.org/docs/Members/FactSheets/Guidelines_for_Choosing_Cognitive.pdf

References:

"Treatment of Anxiety in Autism Spectrum Disorders Using Cognitive Behaviour Therapy: A Systematic Review" by Russell Lang, April Regester, Stacy Lauderdale, Kristen Ashbaugh, and Anna Haring. Developmental Neurorehabilitation, February 2010, Volume 13, Issue 1.

"Evidence-Based Practices for Children, Youth, and Young Adults with Autism Spectrum Disorder" by Connie Wong, Samuel L. Odom, Kara Hume, Ann W. Cox, Angel Fettig, Suzanne Kucharczyk, Matthew E. Brock, Joshua B. Plavnick, Veronica P. Fleury, and Tia R. Schultz
http://autismpdc.fpg.unc.edu/sites/autismpdc.fpg.unc.edu/files/2014_EBP_Report.pdf

New Free Downloads

Morning and Evening Routine Picture Cards - <http://positively-autism.blogspot.com/2014/03/morning-and-evening-routine-picture.html>

"Ouch" Cards: Teach a Child To Tell You Where They Feel Pain - <http://positively-autism.blogspot.com/2014/03/ouch-cards-teach-child-to-tell-you.html>

News:

March 2014 Positive Autism News Stories - <http://positively-autism.blogspot.com/2014/03/march-2014-positive-autism-news-stories.html>

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