

Health Condition Spotlight: Anxiety

Corinne Catarozoli, Ph.D.

February 11, 2026

10:30 – 11:30 am

Optional office hours 11:30 am – 12:30 pm

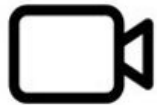


Zoom Keeping and Netiquette



Audio

Mute when not speaking



Video

Video settings are a personal choice



Chat

Listen for chat prompts
Save thoughts and questions
for Discussion / Q+A



React

=



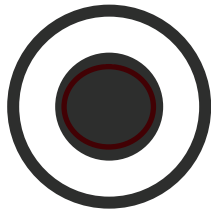
Experiencing delays? Close
other tabs and/or browsers

Thanks in advance for your patience!

Accessibility and Privacy



Closed captioning is available in English and a variety of translations



The presentation portion of this meeting will be recorded and the chat will be saved so that we can respond to all of your comments and questions

Overview

Anxiety: What is typical and what is a problem?

Treatment for anxiety

School-based supports

How to find a provider

What is normative childhood anxiety?

- **Anxiety is a normal, natural, and adaptive emotion**
- **Childhood fears are very common**
 - **i.e. separation, monsters/costumed characters, animals**
- **These tend to be mild, transient, non-interfering**
- **Separation anxiety is common and normal in children approximately 10 months to 2 years**



Anxiety Disorders

- **Social Anxiety Disorder**
- **Separation Anxiety Disorder**
- **Generalized Anxiety Disorder**
- **Specific Phobia**
- **Selective Mutism**
- **Panic Disorder**
- **Agoraphobia**

- **Obsessive-Compulsive Disorder**
- **Tic Disorders/Tourette Syndrome**
- **Post-traumatic Stress Disorder**



***Panic attacks can be associated with any anxiety diagnosis, not only panic disorder**

Common Anxiety Chief Complaints

Psychological:

- Excessive worry or rumination
- Fear of negative evaluation
- Panic attacks

Somatic:

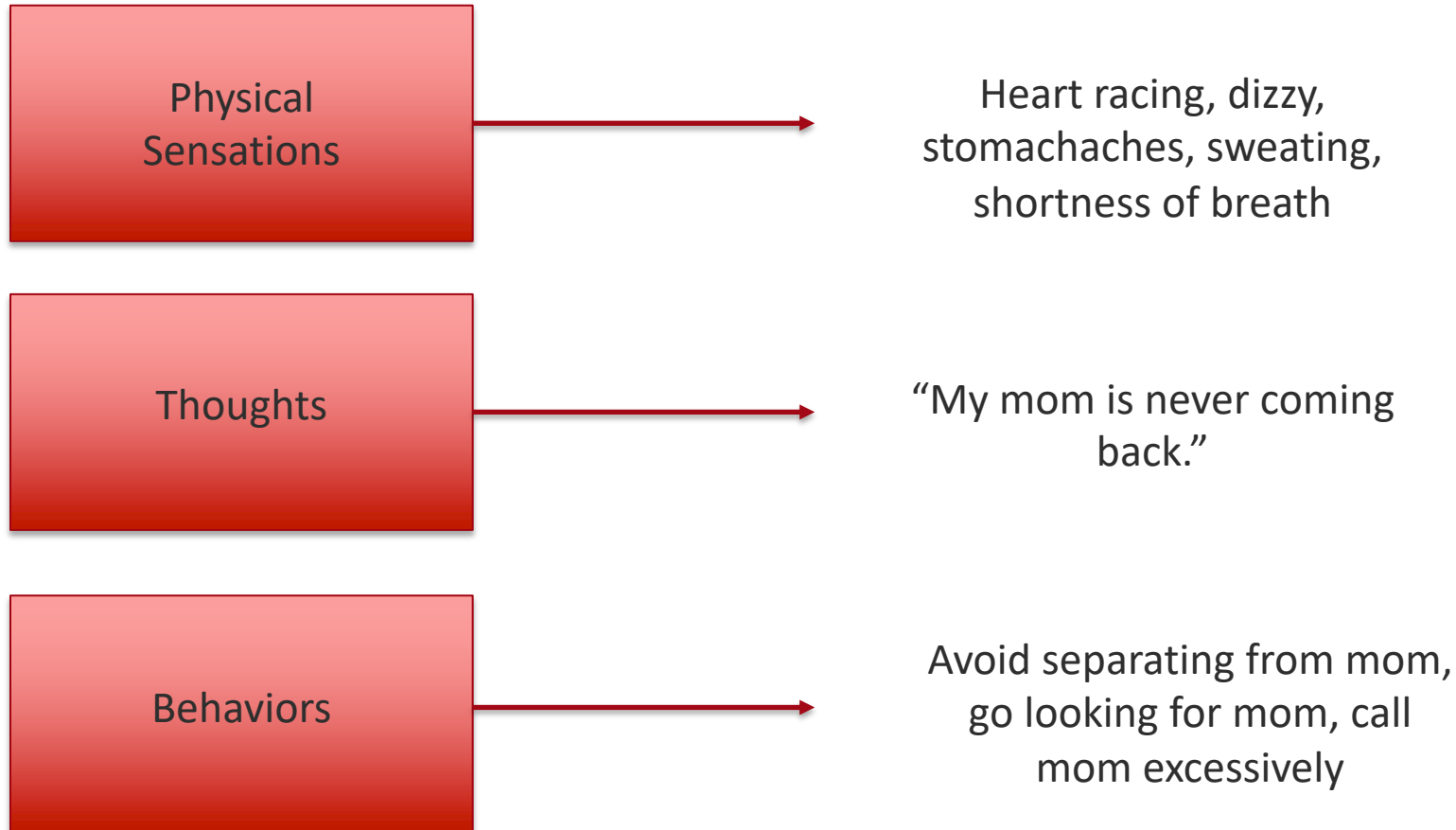
- Chest pain
- Shortness of breath
- Dizziness or other panic-like symptoms
- Stomachaches/abdominal pain
- Vomiting
- Headaches
- Pain or other diffuse somatic complaints
- Sleep difficulty
- Loss of appetite

Common Comorbidities

- **ADHD**
- **Depression**
- **Substance use**
- **School avoidance**

Anxiety is a “gateway” diagnosis. If left untreated, it often leads to other psychiatric symptoms and related problems.

Anxiety is a three-pronged beast



Normal
Natural
Necessary

Anxiety is a false alarm

Danger



True
Alarm

No Danger



False
Alarm

When should you refer?

- Symptoms cause functional impairment
 - School refusal
 - Avoidance
 - Interference with normal developmental milestones
- Symptoms cause a great deal of distress
- Symptoms have chronic course or acute exacerbation

Intervening early is associated with much better outcomes!

Treatment for Anxiety

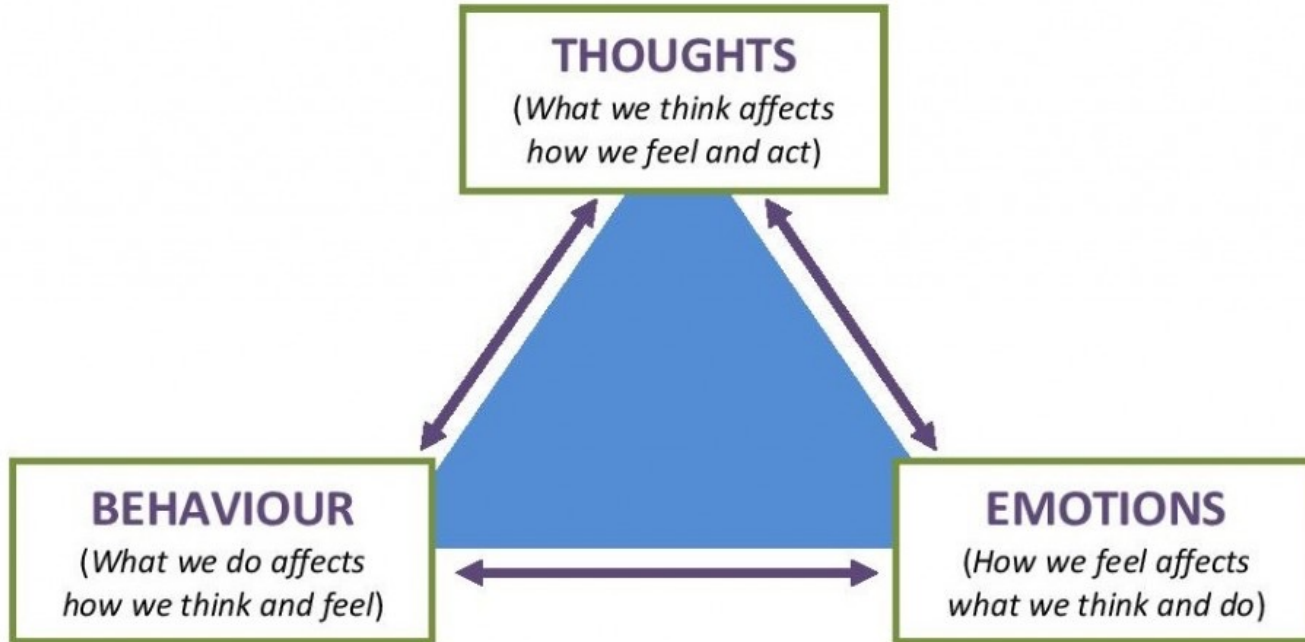


Cognitive Behavioral Therapy

What is CBT?

- **CBT is a brief, short-term, skills-based therapy that focuses on teaching concrete coping strategies**
- **Emphasizes the connections between thoughts, feelings, and behaviors**
- **Focus on changing the way children think and behave**
- **Youth learn how to modify negative or irrational thoughts to be more neutral and helpful**
- **Typical course of treatment is 8-12 sessions**
- **In primary care, can use CBT skills/interventions in an abbreviated manner**

Cognitive-Behavioral Therapy



The CBT Model

“No one will talk to me at school”

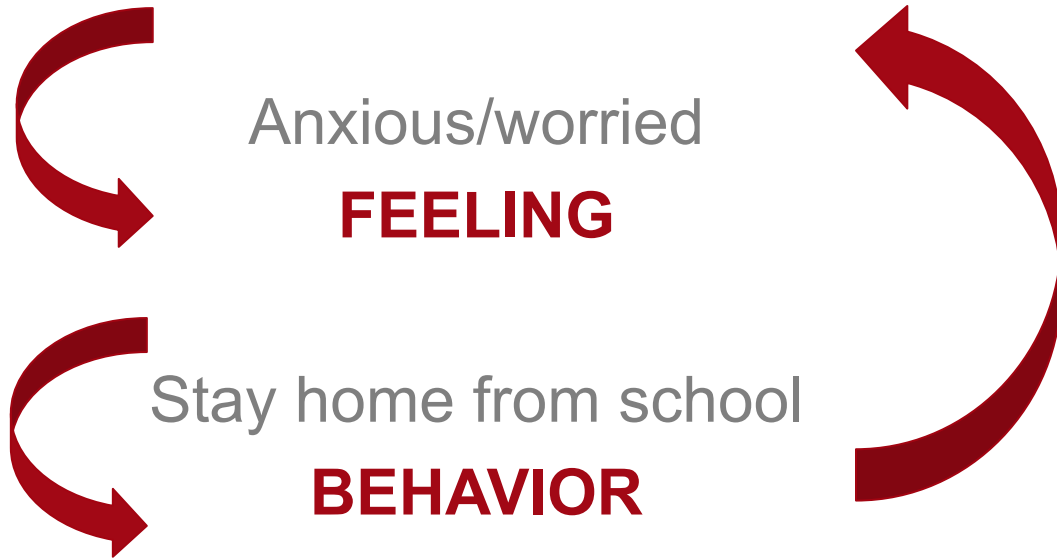
THOUGHT

Anxious/worried

FEELING

Stay home from school

BEHAVIOR



Evidence base for CBT for anxiety

- **Robust literature for the use of CBT for pediatric anxiety**
- **Child/Adolescent Anxiety Multimodal Study (CAMS; 2008)**
 - **Tested CBT, Sertraline, combined treatment, and placebo for youth anxiety**
 - **CBT, Sertraline, and combined treatment were all more effective than placebo; combo was more effective than CBT or Sertraline alone**



Components of CBT

- **Psychoeducation**
- **Self-monitoring (triggers & progress)**
- **Relaxation techniques**
- **Cognitive restructuring (examining unrealistic beliefs)**
- **Behavioral rehearsal and exposure (limiting avoidance)**

Psychoeducation

- **Biological bases of anxiety**
 - **Anxiety is normal, natural, necessary**
 - **Anxiety protects us and helps keep us safe**
 - **“Alarm bell” or signal that we’re in danger**
- **False alarm analogy**
- **Components of anxiety (physical, cognitive, emotional)**
- **The role of avoidance in maintaining and exacerbating anxiety**

Diaphragmatic Breathing



- Encourages belly breathing vs. chest breathing
- Analogy of filling up balloon in belly, blowing out birthday candles
- Model and practice with children

Progressive Muscle Relaxation



- Systematically tensing and releasing muscles
- Highlights difference between tense and relaxed muscles
- Provides active strategy to increase feelings of self-efficacy and control
- Use age-appropriate language (“squeezing lemons” or “spaghetti arms”)

Catch Our Negative Thoughts: Cognitive Restructuring



- Anxiety causes kids to **overestimate** danger, risk and threat and **underestimate** their ability to cope
- Cognitive restructuring modifies anxious and unhelpful thoughts to be more realistic, accurate and helpful
- Use evidence-finding to challenge irrational thoughts

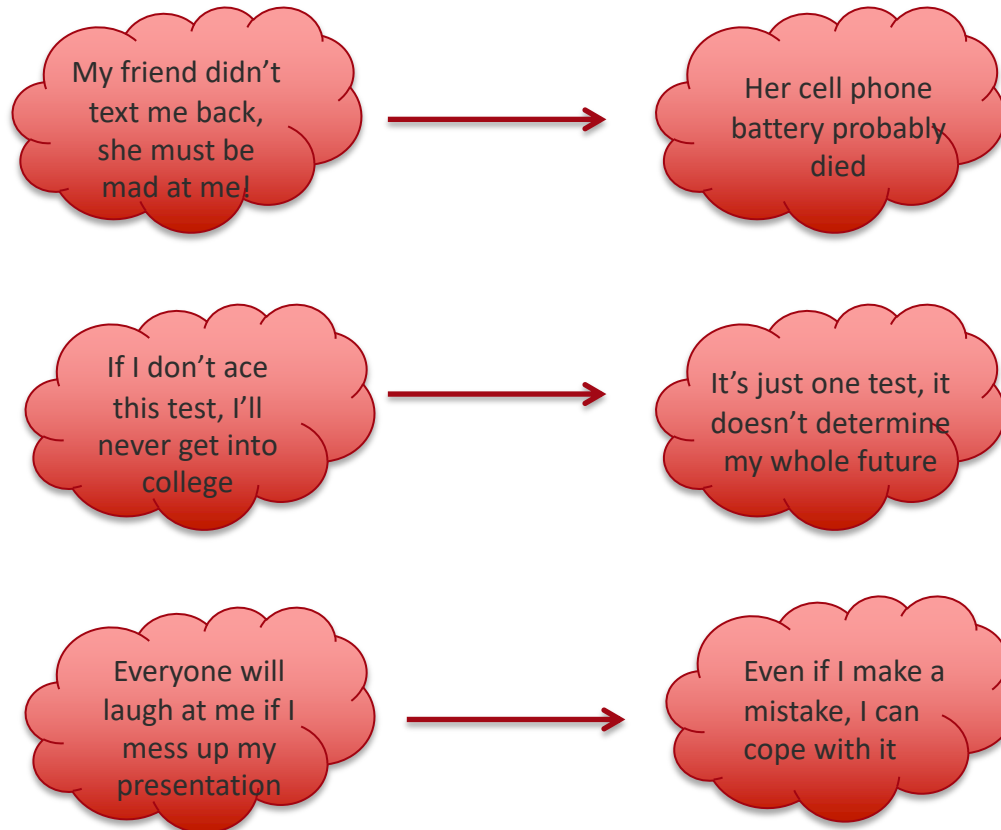
How likely is that to really happen?

Has this ever happened to me before?

Would I be able to cope?

What are some alternative explanations?

Changing Our Thoughts



Catch
Check
Change

Exposure



- **Gradually exposing kids to the anxiety-provoking stimulus**
- **Decreases avoidance response**
- **Provides corrective learning experience**
- **Kids learn feared outcome is unlikely to happen or not so bad to deal with**

Rewards and Positive Reinforcement

This Chart belongs to: _____

Reward Chart

Task	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday	Total

When I reach my goal of ____ stars
My reward will be

When I reach my goal of ____ stars
My reward will be

When I reach my goal of ____ stars
My reward will be

When I reach my goal of ____ stars
My reward will be

- Providing positive reinforcement for desired target behavior
- Rewarding “brave behavior”
- Reward can be tangible (i.e. sticker, toy, candy) or less concrete (i.e. praise, privileges, special time)
- Rewards must be:
 - Sustainable
 - Consistent
 - Incentivizing

Strategies for Parents



- Minimize accommodation
- Prompt to use relaxation strategies
- Reassure one time only
- Prevent avoidance
- Manage own anxiety; remain calm and neutral

School based supports

- **504 plans/accommodations:**
 - Students qualify for 504 Accommodations if:
 - They have a physical or mental impairment; and
 - The impairment substantially limits at least one major life activity.
- **Individualized Education Plan:**
 - Anxiety falls under “Other Health Impairment”
 - Includes accommodations and special instruction

REQUEST FOR HEALTH SERVICES/SECTION 504 ACCOMMODATIONS PARENT FORM 2025-2026

Name of Student _____ DOB _____ Student ID# _____
 School Name _____ School ATS/DBN _____ Grade/Class _____
 Name of Requesting Parent/Guardian _____ Relationship to Student _____
 Date Submitted to the 504 Coordinator _____ Name of 504 Coordinator _____
 Does the student have a current IEP? Yes No 504 Coordinator Email _____

Parent/Guardian must complete entire form and submit to the school's 504 Coordinator or IEP team.

Part 1: Reason for requesting accommodations (Describe the concern below and how it affects the student's performance at school):

Request accommodations based on the concerns listed above. Please contact your school's 504 Coordinator or IEP team with any questions.

Request for Accommodation(s) <small>Guardian Checks all requested:</small>	New Request, or Modification <small>For school use only</small>	Renewal without Modification <small>For school use only</small>
Testing Accommodations <input type="checkbox"/> Test schedule/administration time (e.g., extended time) <input type="checkbox"/> Test setting/location <input type="checkbox"/> Method of presentation/Directions/Assistive Technology <input type="checkbox"/> Method of test response/content support <input type="checkbox"/> Other (please specify) _____	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Classroom / Curriculum Accommodations <input type="checkbox"/> Class schedule/use of time <input type="checkbox"/> Class activities setting <input type="checkbox"/> Method of presentation/Directions/Assistive Technology <input type="checkbox"/> Method of class activities response/Content Support <input type="checkbox"/> Other (please specify) _____	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

MEDICAL ACCOMMODATIONS REQUEST FORM
 Office of School Health | School Year 2025-2026

A health care practitioner completes this form, and parent submits it to the 504 Coordinator or IEP team with attached: Request for Health Services/Section 504 Accommodations Parent Form with HIPAA Authorization (for new or modified requests), Medication Administration Form (MAF) and/or Medically Prescribed Medication, and any additional supporting documentation from practitioner/provider.

Practitioner Name: _____ OS/S #: _____ Student's Date of Birth: _____

504 Request IEP Request IEP Classification: _____

HEALTH CARE PRACTITIONERS COMPLETE BELOW

MEDICAL INTERVENTION

Diagnosis: _____ /ICD-10 Code/DSM-V Code(s): _____
If this is for a diagnosis of allergies/anaphylaxis, diabetes, or seizure disorder, please complete the Medical Accommodations Request Form Addendum.

Onset is: Acute Chronic Expected duration of accommodation: _____ weeks

Intervention: nursing services paraprofessional support transportation other (see Other Services)

If requesting nursing or paraprofessional support, will be reviewed on a case-by-case basis to determine whether the student needs 1:1 school-based support. When a student requires medication during the school day and is unable to self-administer, medication is administered by the school nurse. Trained paraprofessionals may administer epinephrine and glucagon; all other medications, including insulin, must be administered by a nurse. Requests for transportation accommodations will be reviewed on a case-by-case basis. Commencement of services, MAFs must be submitted for all medications, supervision, and monitoring, and Medically prescribed forms submitted for clinical procedures performed by OSH and its agents during school hours or DOE programs or activities.

Current clinical status (level of control, current management plan, pending evaluations, etc.): _____

Type of Medical Intervention:	Intervention Needed
<input type="checkbox"/> Administration of Medications Please complete and submit all applicable Medication Administration Forms (MAFs: Allergy & Anaphylaxis, Asthma, Diabetes, General, Seizure).	<input type="checkbox"/> during school
<input type="checkbox"/> Emergency Medications (e.g. glucagon, rectal diazepam) Please list all	<input type="checkbox"/> during transport



504 Plans

[Read more about 504 Plans for Anxiety here:](#)

Section 504 Protections for Students with Anxiety Disorders



Section 504 of the Rehabilitation Act of 1973 is a Federal civil rights law that protects students from disability-based discrimination in schools (including preschools, K-12 schools, colleges, universities, and other postsecondary institutions) that receive Federal financial assistance.

Under Section 504, a student with an anxiety disorder can be a student with a disability for purposes of Section 504 if the student's anxiety disorder substantially limits one or more of the student's major life activities. [34 C.F.R. § 104.3\(i\)\(1\)\(i\)](#).

What is an anxiety disorder?

According to the [National Institute of Mental Health](#), an anxiety disorder is different from the occasional anxiety that is a routine part of life and can interfere with daily activities such as schoolwork and relationships. For a person with an anxiety disorder, their feelings of anxiety persist and can get worse over time. Symptoms of an anxiety disorder include having

The Office for Civil Rights (OCR) enforces Section 504 against entities that receive Federal financial assistance from the Department of Education.

In addition to the rights and obligations discussed in this fact sheet, a child with a disability attending a public K-12 school may have additional rights under the Individuals with Disabilities Education Act. Parents also may have additional rights under that statute and its implementing regulations.

OCR also shares in the enforcement of Title II of the Americans with Disabilities Act (ADA) with the Department of Justice (DOJ), and DOJ enforces Title III of the ADA. Both Title II and Title III can also apply to schools. For



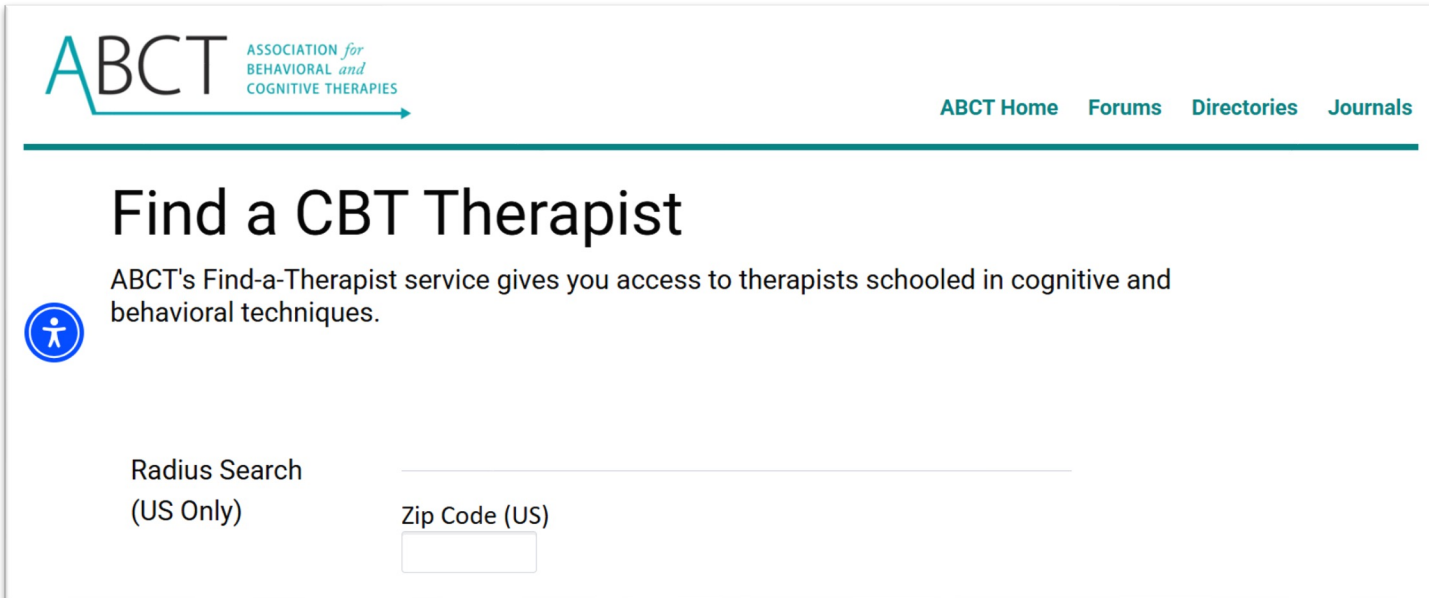
Accommodations for Anxiety

- Providing a designated calm-down area
- Incorporating scheduled and as-needed breaks throughout the day
- Preferential seating
- As needed for visits with the school's counselor
- Creating a plan to help the student make up work when they are absent
- Gradual re-entry plans for students who have missed school
- Allowing extra time to complete tests, quizzes, projects, homework, etc.
- Separate quiet testing location

Home instruction

- Families with anxious students may inquire about home instruction or remote learning
- Home instruction typically worsens anxiety and is contra-indicated for treatment
- Instead, work with the school on a gradual school re-entry plan that allows the student to build up to full in-person attendance

How to find a CBT provider



The screenshot shows the ABCT website's search interface. At the top left is the ABCT logo with the text 'ASSOCIATION for BEHAVIORAL and COGNITIVE THERAPIES'. To the right are navigation links: 'ABCT Home', 'Forums', 'Directories', and 'Journals'. The main heading is 'Find a CBT Therapist'. Below it is a paragraph: 'ABCT's Find-a-Therapist service gives you access to therapists schooled in cognitive and behavioral techniques.' To the left of this text is a blue circular icon with a white person symbol. Below the text is a search form with two input fields: 'Radius Search (US Only)' and 'Zip Code (US)'. The 'Zip Code (US)' field is currently empty.

ABCT Find a Therapist Search by Zip Code

How to find a CBT provider

- **Many providers are out of network with insurance**
- **Hospital-based clinics and agencies are most likely to take commercial insurance and Medicaid**
- **Major medical centers with medical training programs often have outpatient psychiatry clinics**
- **Help families vet providers**

How to find a CBT provider- Telepsych



Counseling on therapy vs. medication



- **Selective Serotonin Reuptake Inhibitors (SSRIs) are most commonly used with children**
- **CBT and SSRIs have both been shown to be effective monotherapies, but more effective when combined**
- **AAP recommends PCP management of mild to moderate anxiety**
- **Also appropriate for PCP to maintain a stable dose**

Q+A and Exit Survey



https://cornell.ca1.qualtrics.com/jfe/form/SV_0dITlqirMQxtdtQ

Mark Your Calendars

Health Condition Spotlight: ADHD

With Dr. Caroline Gillenson

Wednesday April 8, 2026

10:30 – 11:30 am

Register: https://cornell.zoom.us/meeting/register/Buk41SpzRIKW-JLKo_f0KQ



**Weill
Cornell
Medicine**