What is Anxiety?

Anxiety is anticipation of or reaction to a perceived threat. This is a normal physiological reaction to stress. When the body perceives a threat, a part of the brain called the amygdala sends the body into fight/flight/freeze mode—the body’s survival mechanism. When this happens the frontal lobe of the brain, the part of the brain responsible for rational thought, planning, and problem solving, turns off. The brain is not able to process new information or think rationally. This allows the body to act more quickly and protect itself. This has helped the survival of animals and humans throughout their evolutionary history. Today, however, many of the stressors humans face are psychological rather than physical, and fight/flight/freeze doesn’t make the problem go away; that doesn’t stop the body’s response, though. Without a resolution to the problem, the body remains in fight/flight/freeze mode and everything becomes a possible danger, leading you to become overly anxious. This response can be learned, meaning if fight/flight/freeze is activated in a situation one time, it may be triggered in similar situations in the future; therefore, a person may feel anxious even when they do not perceive danger or feel threatened in any way due to this learned response.

School Triggers for Anxiety

The typical school environment can trigger anxiety in almost any student. Tests, grades, homework, time management, performance pressure, and social conflict, just to name a few, are worries of some students. The student with autism spectrum disorder (ASD) or intellectual disability (ID) faces additional triggers on top of those common school stressors. These may often be things that the average student doesn’t even notice. For example, triggers may include the social nature of the classroom, sensory stimuli, social expectations and interactions, communication challenges, unexpected changes, slower processing times in a fast paced classroom, a chaotic environment, being perceived as different, and unpredictability. With so many additional sources of stress, it is not surprising that people with IDD and ASD often have higher than average baseline levels of anxiety, making it easier for these students to get in their red zone and have a big reaction to what others may perceive as a small problem.

On top of these triggers, compounding issues like a history of trauma, depression, social anxiety, selective mutism, separation anxiety, and other psychological disorders can exacerbate anxiety in school.

What Does Anxiety Look Like?

Most people have an idea of what anxiety looks and feels like—some combination of fear, racing and irrational thoughts, increased heart rate, short breaths, sweating, dry mouth, difficulty speaking, restlessness, feeling “on edge,” irritability, and physical symptoms like stomachaches or headaches.

For the student with IDD or ASD, these symptoms of anxiety might be present, but anxiety also might look very different. For this population, anxiety can present as perseveration, asking for reassurance or repeating the same questions, inattention, aggression, self-harm or threats of self-harm, threats toward others, “escape”
behaviors, yelling, refusal to participate or follow instructions, eloping, panic attacks, compulsions, repetitive behaviors, stemming, and shutting down. No matter the specific symptoms the students experience, one thing is in common—anxiety is locking up the brain, turning off the thinking part of the brain, and triggering the fight/flight/freeze impulses. It is important to recognize when these behaviors are based in anxiety. The student is not intentionally disruptive or posing a danger to himself or others. He is acting out of fear and unable to think before acting, and, while keeping him safe should be priority, punishment may not be the appropriate response.

Some of these behaviors can create safety concerns and significant disruptions to class, resulting in unsuccessful educational opportunity for both the student and classmates, and the student is removed from the inclusive classroom. By helping students to calm their nervous systems, we can decrease anxiety symptoms and increase educational success in the inclusive setting.

**Strategies to Help Students Manage Anxiety**

As teachers and school professionals, it is impossible to control all of the possible sources of anxiety that a student might face. But there are ways to calm the nervous system even when the trigger is still present. The window of tolerance is a concept introduced by Dr. Daniel Siegel (2012). He explains that everyone has a window within which we can tolerate different emotions. Once emotions get too intense, we are outside of the window, and we enter the fight/flight/freeze response. The thinking part of the brain is off in fight/flight/flight mode, so learning can only happen when a student is within their window of tolerance. Your goal will be keeping the student within their window and helping them get back in their window if their nervous system is too highly aroused. Choose strategies appropriate for the student’s developmental level rather than their chronological age.

First, when possible, reduce or eliminate the stressful stimuli. If fluorescent lights are a trigger, you might try turning them off and putting lamps in your classroom. Create a predictable, structured schedule and environment, and plan ahead to help the student with changes. Incorporate visuals whenever possible, including as methods of communication. When anxiety is high, it is easier to think, problem solve, and communicate with pictures than with words. Talk Blocks are a great tool both for teaching self-advocacy and for removing some of the pressure required in verbal communication to find the right words quickly.

Have a sensory toolbox in the classroom. Cognitive affect management strategies may not be effective for some students in the IDD and ASD populations, but sensory strategies can be. Include things like calming scents, mandalas to color, water beads, bouncing balls, silly putty, yoga poses, a weighted blanket, a small trampoline, pin art, bubbles and pinwheels to encourage deep breathing, and tactile bins. A variety of tools means students can find and choose what works.

When someone identifies a problem, it is normal for us as humans to go straight to problem solving; however, when anxiety is the problem, resist this response. Instead, move to listening and validation. When you notice that a student is struggling, say to the student, “I can see that you’re having a hard time. What’s got you upset?” Simply listen to their worries rather than trying to solve them. Feeling heard can make a big difference. The other common response is panic or “oh no” mode when the child starts a meltdown. Resist this, too. When we go into defensive mode, our nervous system is activated, and the child’s nervous system then feeds off of our activated nervous system, activating his or hers even further. Approach the child’s meltdown from a place of love rather than defensiveness and learn ways to manage your own nervous system during stress.

Teach the student concrete self-soothing strategies. For example, allow the child to use a fidget spinner or roll a small ball on their leg or between their fingers to focus their attention. Having one stimulus to focus on can help the student tune out all of the other stimuli that are pulling their brain in different directions; however, you will have to teach them how to use the tools for this purpose to prevent them from becoming distractions. It is also
an opportunity for you to teach the student that they have the ability to focus attention away from what is causing them discomfort or pain. Incorporate mindfulness strategies into the classroom routine or into the child’s IEP as part of their daily routine.

**For More Information**

For more information about the neurobiology of the brain and strategies for calming the nervous system, see these sources:

Garcia, Gabi. (2017). *Listening to my body: A guide to helping kids understand the connection between their sensations (what the heck are those?) and feelings so that they can get better at figuring out what they need* (2nd ed.). Austin, TX: Take Heart Press.


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