

STEP-UP TRAINING DAY 2:

TRANSDIAGNOSTIC BRIEF BEHAVIORAL THERAPY FOR ANXIETY AND DEPRESSION

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- STEP-UP developer
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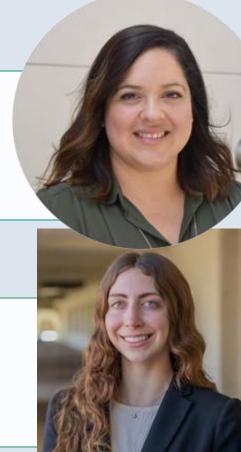
INTRODUCTIONS

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- Manual co-author and trainer
- Culturally competent treatment

Ms. Megan Morillas

- Lab coordinator in San Diego
- Site liaison





STEP-UP Training Agenda

Day One

- Overview
 - Research support
 - Study design
 - Treatment model
- Lesson 1: Stress and mood
- Lesson 2: Relaxation and pleasant activities
- Lesson 3: Problem solving

Day Two

- Lesson 3: Problem solving
- Lesson 4: Developing a Master Plan
- Lesson 5: Master Plan practice
- Lesson 6: Relapse prevention

Consultation calls

Model consultation and research coordination

Lesson 3: Practice

Problem-Solving PLANS Worksheet List out different options Narrow it down and make a plan Solve it! And see if it worked! What's the problem? Options? (even silly ones) Analyze alternatives (pros and cons) Cons

Practice Pinpointing the Problem: "School sucks"

- Review case examples for Mateo and Angie
- Work together to try to pinpoint the problem for each of them
- How are their problems the same and different?

<u>Youth</u>	What sucks?	How could we pinpoint the problem better?
Mateo	• 5	?
Angie	, Š	?

Lesson 3: Practice

Problem-Solving PLANS Worksheet List out different options Narrow it down and make a plan Solve it! And see if it worked! What's the problem? Options? (even silly ones) Analyze alternatives (pros and cons) Cons

Practice Pinpointing the Problem: "School sucks"

- Review case examples for Mateo and Angie
- Work together to try to pinpoint the problem for each of them
- How are their problems the same and different?

<u>Youth</u>	What sucks?	How could we pinpoint the problem better?
Mateo	 My best friend isn't spending time with me Spending lunch alone I feel awful by the end of the day 	?
Angie	I'm away from my parents and worry about them My parents don't respond to my text I freak out and don't know what to do	?

Lesson 3: Common Themes

Problem is avoidance / withdrawal

Solution is approach (leads directly into Lesson 4)

Problem is uncontrollable stressors

o How can youth/family use skills from Lesson 2 and adaptive coping?

Problem is homework non-compliance

Problem is "crisis of the week"

Lesson 3: Common Challenges

Don't do the work for the youth

Can't think of a problem?

- Review mood monitoring or symptoms assessment
- See Implementation Index for full examples (last resort)
- What to do if child's problem is "too big" for one meeting?

Difficulty pinpointing the problem?

 See "tips" for prompts to get youth started (e.g., what part can you control, is the problem inside, is the problem avoidance)

Blanking on solutions?

See list of questions on website (what have I tried, what would I like to do even if it's hard, etc.) Lesson 4:

Developing a Master Plan



Lesson 4: Developing a Master Plan

- WHAT are the goals of Session 4?
 - To set 1-2 goals for rest of treatment
 - To use those to come up with a Master Plan for feeling better
 - To try a step (one that's only a little hard) from the Master Plan (demonstration exercise)
- WHY do we do Lesson 4?
 - This begins our shift in treatment from skillbuilding to approach
 - To prepare (and demonstrate) how we can take small steps toward approach
 - Doing the things we need and want to do one step at a time
- **HOW** do we move through Lesson 4?

Lesson 4: Flow of activities

Substantial pre-session planning

- Wrap up problem-solving (~time varies)
- Collaborate on one or two stress goals
- Begin drafting Master Plan working document
- CONDUCT DEMONSTRATION EXERCISE
- Assign feasible between session practice

• Therapist reflection exercise / consultation call

Lesson 4: Content

Pre-session planning

Useful to have consultation call <u>prior</u> to session

Print Lesson 4 Cheat Sheet

Plan session timing and anticipate stop-points

Plan for parental involvement (as appropriate)

- 1. Set agenda
- 2. Review between-session practice
 - Review overall mood and use of skills
 - O Review specific problem-solving homework
- 3. As needed, wrap-up Problem-Solving Lesson
 - O May be able to link directly into master plan
 - O Or, look for "off ramp" of meaningful homework

Lesson 4: Content



- 4. Discuss approach vs. avoidance
 - Normalize avoidance (hitting snooze)
 - Introduce idea of turning avoidance into approach
 - May use pros and cons from problem-solving

- 5. Develop approach goals that...
 - relate to problems in youth functioning and matter in daily life
 - are broad enough that many kinds of steps or activities could fit under the goal
 - are narrow enough that they can guide behavior ("feeling better" is too broad)

Lesson 4:
Practice
identifying goals

<u>Youth</u>	<u>Symptoms</u>	Possible goals?
Mateo	Social anxietyDepressive symptoms	

CASE VIGNETTE: MATEO

Mateo is a 15-year-old boy in the 10th grade with a primary diagnosis of social anxiety and elevated depression symptoms. He has always been socially anxious, with difficulty meeting new people, concerns that his peers will judge him, a horrible fear of performance (when called on in class he becomes sweaty, has heart palpitations, difficulty breathing, and shakes); nonetheless, he wishes that he could make friends. He often spends lunch in the school library where he doesn't have to interact with others and, in the past, has even elected to fail group assignments because he worries that his classmates will think he's dumb and avoids interacting with them. He avoids any social situations he can, has never been to a party, and refuses to go to the mall, store, or movies, even with his parents. Notably, Mateo is less concerned about what adults think of him. His dad recently got him a part-time job at dad's construction company doing administrative tasks, and, although anxious at first, Mateo was able to talk to adults in his dad's office. He reports still sometimes feeling anxious if he meets someone new at the office, but it only takes a couple of days for him to feel comfortable around new adults.

Mateo has one friend who lives down the street who he's known since kindergarten; this friend often comes over to Mateo's house to play video games and used to try to coax Mateo to do teenager things (e.g., school dances, going to the mall with classmates), but this school year Mateo feels like his friend has given up on him in exchange for spending time with kids who go to parties. Mateo's girlfriend of one year—whom he met at the school library—broke up with him right after winter break. She is also a pretty shy kid, but got sick of never being able to go on dates with Mateo because of his fears of being scrutinized by others in public places.

Lesson 4: Practice identifying goals



Lesson 4:
Practice
identifying goals

<u>Youth</u>	<u>Symptoms</u>	Possible goals?
Angie	 Separation anxiety Generalized worries Depressive symptoms 	

CASE VIGNETTE: ANGIE

Angie, aged 9, has been experiencing separation anxiety symptoms for as long as her family can remember. Now that she is in 4th grade, her parents are concerned that she is refusing to attend school field trips, refuses invites to her friends' houses, and she texts her parents non-stop while she is at her after school program. Angie has one friend, who is always willing to come to her house. Angie also has general worries that make social activities and new situations difficult on top of the separation concerns. She worries that people will stop wanting to be her friend, she worries a great deal about other kids at school being smarter than her or better than her at sports, she worries about world events (global warming, mass shootings) and feels extremely uncomfortable in new situations, even if her parents are there (e.g., worrying she might run into someone from school at her local library, worries about "smash and grabs" or violent mobs when at the mall).

Angie reports that recently she has been feeling extremely sad "for no reason," feels like crying all the time, and calls herself "a stupid person" unrelated to her separation concerns. Parents report that Angie has stopped doing the things she typically loves to do, like helping her mom make dinner, visiting her grandparents, dancing to YouTube videos, and even watching her favorite TV show. Angie and her parents deny that this recent depressed mood is related to her separation concerns, but parents report that when their daughter is sad, she also seems to be more nervous about them being at work.

Lesson 4: Practice identifying goals

<u>Youth</u>	<u>Symptoms</u>	Goals identified in Lesson 4
Mateo	Social anxietyDepressive symptoms	 being more comfortable with peers attending parties but able to leave the party if getting rowdy having strategies to manage mood
Angie	 Separation anxiety Generalized worries Depressive symptoms 	 hanging out with friends outside of home (e.g., after school program, mall, arcade at pizza parlor) having good things to look forward to regularly

Lesson 4: Content





- 6. Discuss how to reach goals with step-by-step plans
 - Anxiety example (spiders)
 - Depression example (bored)
 - Many more examples on website in both youth view and in the therapist pages

BRAVE IN THE DARK

STEP	Description
1	Turn off the lights during the session with the therapist and stay in the dark for 1 minute. Practice this three times, then increase the length of time to 2 minutes.
2	Sit alone in the dark for 1 minute (therapist is not on the call in the same room). Practice this three times, then increase the length of time.
3	At night, walk into a dark room, but leave the door open. Stay there 1 minute and practice increasing the time.
4	Turn off the light to go to sleep at night but leave a light on in the hallway and the door cracked open. Work on shutting the door closed a little bit more each night.
5	Invite a friend over for a sleepover! Stay in the dark with no nightlight buenjoy having a friend in there with you.

Lesson 4: Content

Example prompts

What's a small step you might recommend to another kid with the same goal?

What's something you think you could do but feels a just a little hard (like a 3 out of 10 stress rating)?

What's something that you know you <u>can</u> do, but it still feels hard when you do it?

Is there anything you wish you could do to reach this goal but it seems too hard right now?

7. Begin drafting an individualized Master Plan

What makes a good Master Plan?

- A "good" GOAL to select should:
 - Relate to functioning so that change in this area should matter in daily life
 - O Be broad enough so many "steps" could fit under the goal
 - Be narrow enough so that the goal can guide behavior ("feeling better" is too broad)
- "Good" STEPS on the plan should:
 - o Be specific
 - O Be under youths' (or youths' and parental) control to try
 - O Be a mix of in-session and out-of-session activities
 - Range in perceived difficulty in order of <u>effort</u>

Lesson 4: Practice building a Master Plan for Angie

Master Plan

I would like to					
_					

(problem you want to solve or goal you want to reach)

Step	Description

Angie's Master Plan for Independence (i.e., Separation Anxiety)

1	Mom leave therapy room and run a quick errand down the street during session. After practicing this a few times, have mom leave her phone with Angie and therapist during session
2	Begin to reduce # times Angie can call or text each parent after school
3	Role play asking mom reassurance questions in session and mom not responding. Also role play texting mom during session with mom not responding.
4	Practice mom going to mailbox, then taking walk around block, then running a 10-15 minute errand while Angie home alone with older sibling.
5	Imaginal exposures of being away from parents and not being able to reach them
6	Angie and friend go to arcade area alone while mom and friend's mom are in the dining area
7	Parents go on date nights 1x/week while Angie and older sibling alone at home. Work way up to no phone calls to parents while they are on date and older sibling reducing responses to reassurance questions
8	Angie go to friend's house for 1 hour after school. Increase amounts of time spent away from parents after school and on weekends.
9	Sleepover at best friend's house
10	Spend weekend at grandparent's house with 1 check-in call to parents

One Master Plan or Two Master Plans?

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Angie's Master Plan for Mood (i.e., depressive symptoms)

1	Track mood daily and in session to notice patterns of mood related to things that Angie's chooses (and that are in her control, e.g., doesn't participate in afterschool program activities). Continue to do so for the remainder of treatment
2	Make a list of small (5 to 30 minute) activities that Angie can do on her own (e.g., listen to music while painting her nails, take a bubble bath) or with another person (e.g., call a friend to plan a weekend activity). Brief activities can be done in session and at home, while longer activities can be planned for in session and done at home. Start to do a 5 to 10 minute activity in each session and daily at home as part of mood tracking
3	Plan a park picnic with parents and sibling
4	Bake and decorate cookies and bring them to school to share with friends at lunch
5	Help parent cook dinner at least once per week
6	Go to aunt's house and have Youtube dance party and makeup tutorial with cousin (parents there, too)
7	Invite best friend over for sleepover with parent permission



Or one COMBINED Master Plan?

(Mateo example)

Master Plan for Social Phobia and Depression

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+ ‡+		
	1	Invite best friend to go to movie or do something else active (throw ball around at
		park, go bowling). If best friend receptive, continue to plan activities with the
		friend. May need to role play how to talk to friend about doing activities just the
		two of them (and not with other kids) at first.
	2	Role play in session and then deliberately out of session start conversations with
		adults at dad's work.
	3	Meet therapist at mall and walk through three stores where likely to see peers.
		Replicate with a parent.
	4	Practice calling businesses to ask for store hours, answering phones at dad's
		company, and talking to front desk staff/checkers at stores.
	5	Identify three acquaintances at school who are nice and either text or call them to
		get clarification on academic assignments during session. Role play in session
		how to start a conversation with each of the three acquaintances. For out of
		session practice for the week, chat with at least one acquaintance either before
		or after class daily, with the goal of chatting with all three acquaintances before
	_	next session.
	6	Select an acquaintance who seems the nicest and invite them to get lunch a
	_	couple of times during the school week.
	7	Invite acquaintance to go see a movie at the mall's theater.
	8	Help parents host a dinner party for employees at dad's work and practice
		starting and maintaining conversations. If one of the employees has a teenager,
	_	parents can invite that teen to attend as well.
	9	Invite a few acquaintances at school and best friend to come over for pizza and a
		movie. Negotiate and problem-solve with parents in session as to how involved
	4.0	(or not) they will be during this hangout.
	10	Role play in session how to attend a high school party, as well as how to leave if
		things get rowdy. Make a plan to attend party for 1 hour with best friend, with
		excuse that parent picking up early for a family event.

Notes on the Master Plan

- Master Plan is a dynamic document that changes
 - Do not need to fully document every single step in this session
 - In fact, some kids get scared or overwhelmed with too long of a list or too many "hard" items
 - Steps ordered by level of effort it takes to do the step, not necessarily level of distress
- Same problem = Different goal across youths
 - Age / developmental expectations
 - Cultural differences in interconnectedness
- Clinician tone and messages to youth and families
 - The step may be hard/uncomfortable/scary/effortful
 - We're going to try it anyway
 - Over time, you'll learn that you can tolerate those feelings
 - Goal is functional improvement over time

Lesson 4: Content

8. DEMONSTRATION EXERCISE in-session

- O Pick a step on the draft Master Plan to try in session
- Many youths (and therapists!) are nervous to start
- Conducting a demonstration in this session makes returning to Lesson 5 easier

What makes for a good demonstration exercise?

- A good demonstration should be:
 - o short but not so short as to be trivial
 - o very likely to "succeed" no matter the outcome
 - o not require too many props or prep time
- Example demonstration exercises:
 - o role playing a conversation with a teacher
 - o texting / calling a friend
 - watching a funny video



Step 1

Plan it out

Before you start, talk through exactly how the practice will work.

- . What are you going to try?
- · Plan the details.
 - · Howlong?
 - · Any props or materials?
 - · People to play a part?
- · What's your stress rating before?
- · What do you expect will happen?

Step 2

Do it and debrief.

Go for it! After you finish, discuss these questions with your therapist.

- · How do you feel?
 - · How did you feel during?
 - · How do you feel now?
- What did you learn?
 - Was it easier or harder than you expected it would be?
 - Were you suprised that you were able to do it?

Step 3

Try again!

Practice is key to progress. Plan and try another practice exercise.

- Plan the details
 - Will you try the exact same thing or make adjustments?
- I low do you feel?
 - What is your stress rating thinking about doing it again?
- What do you expect this time?
- Don't forget to debrief again!

NOTE:

Demonstration
exercise has the same
structure as plan
practice in Lesson 5

Lesson 4: Content

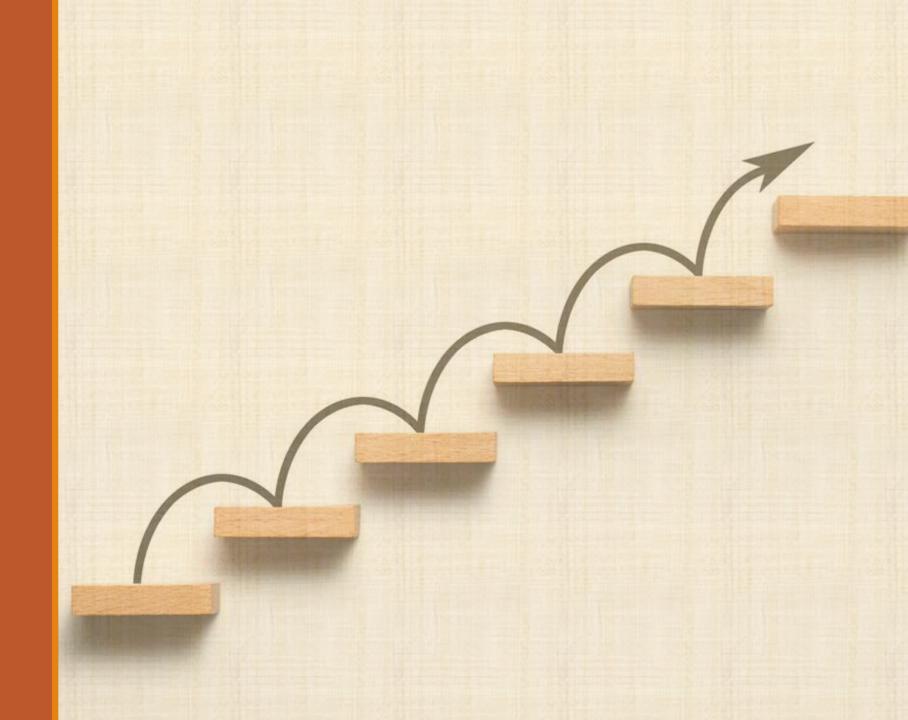
- 9. Assign homework / communicate to parent
 - Mood monitoring
 - o Problem solving?
 - o Relaxation?
 - Must include some element of the Master Plan
 - Brainstorming more steps
 - Repeating the demo on your own
 - Getting parent input
 - Trying a new step
 - Prepping / bringing things for next session
- 10. Complete *Therapist Reflection exercise* for consultation call

Lesson 4: Therapist Reflection

- What are treatment targets/goals?
- Will goals be combined or separate?
- What are content domains/steps on Master Plan? Anything not yet addressed?
- What was demonstration exercise? Easy? Hard? What's next for approach?
- What will you need for Lesson 5 (session 5)?
- Difficulties with timing, motivation, negotiation of demonstration?
- For simulated approach in session, role plays or other practice?
- Anything need to be addressed in session 5?
- For Lesson 5:
 - Where will you start?
 - What materials/props? Who's bringing them?
 - Amount of parental involvement?
 - Timing of session?

Lesson 5:

Practicing the Master Plan



Lesson 5: Practicing the Master Plan

- WHAT are the goals of this lesson?
 - To implement the Master Plan in session
 - To foster between-session practice
 - To guide CUMULATIVE progress in and out of session
- WHY do we do this lesson content over and over?
 - Approach is the #1 evidence-based treatment strategy for youth anxiety and in the top 2 for youth depression.
 - Primary way to improve functioning
 - And to learn distress tolerance
 - Step-by-step way to approach the big goals set in Lesson 4
- **HOW** do we move through Lesson 5?

Lesson 5: Flow of activities

Pre-session preparation needed

- Maintain focus on Plan progress
- Practice in session
- Practice between sessions
- Calibrate, repeat, and climb the steps
- Continue using other skills as needed to support progress

Post-session planning needed

Lesson 5: Content

Pre-session planning

Useful to have consultation call <u>prior</u> to session

Print Lesson 5 Cheat Sheet

Plan session timing and anticipate stop-points

Gather props / prepare activities

Plan for parental involvement (as appropriate)

1. Set agenda

- 2. Review between-session practice
 - o Review overall mood and use of skills
 - Progress on Master Plan
 - Assess ability to improvise to accomplish plan

Lesson 5: Content

DISCUSS and revise the Master Plan

Take a look at your Master Plan with your therapist

- What step of the plan did you complete last?
- How many steps are left?
- Discuss your overall progress together.
- . Do you need to make any changes to the plan to help you reach your goals?

If this is the first time you are doing Lesson 5, you will probably spend more time working to fill out the steps on the plan and making some changes. However, every week, you and you therapist should take a minute to see where you are and make adjustments, if needed.

Use tips below to get your Master Plan in great shape

- O Focus on little steps.
- Order steps from easiest to hardest.
- O Close up any big gaps between steps
- O Remember, it's a work in progress.

If you would like to review an example of another kid's Master Plan focused on boosting mood and making friends, click here.

3. Discuss and revise Master Plan

- This should be relatively brief discussion
- O UNLESS the youth has made massive progress and its time to pick much harder steps
- Link steps on plan to their big goal to maintain motivation and engagement
- OK for parents to reward effort
- Reinforce the idea of turning avoidance into approach
- May use pros and cons from problem-solving

Lesson 5: Content

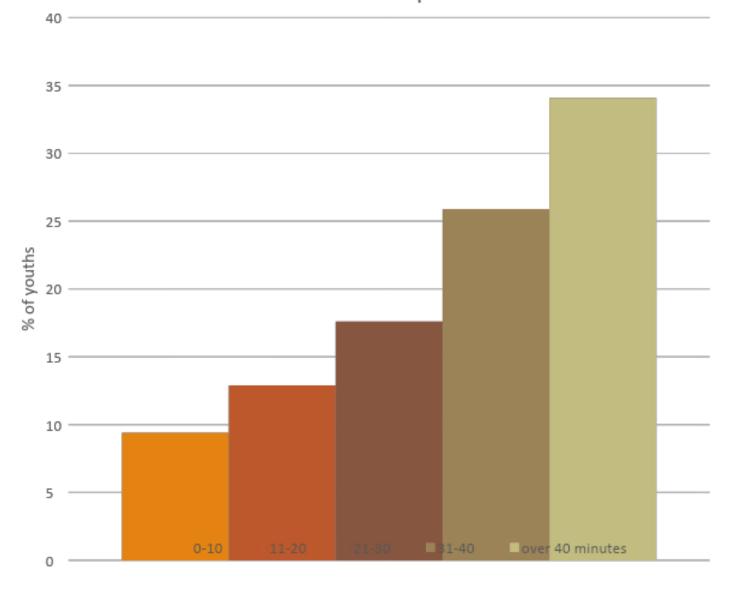
- 4. Practice steps on the Master Plan in-session
 - Calibration with repetition
 - o In session practice should comprise 60-70% of session time

Behavioral practice coded from sessions

- Focus on active phase (Sessions 6-11)
- Time sampled sessions
- Coded minutes spent in "graded engagement"
- High variability
- High level of behavioral practice (mean 31 mins)

(Gonzalez et al., in prep)

Mean minutes of behavioral practice in session



More behavioral practice in session predicted higher youth functioning at post, controlling for baseline functioning and parental depression 100 Functioning (CGAS) 80 y=68.55+4.82 40 -2 -1 0 Regression Standardized Predicted Value

TESTED OUTCOMES

- Functioning (CGAS)
- Anxiety (PARS)
- Depression (CDRS-R)

TESTED PREDICTORS

- Baseline value of outcome
- Mean minutes behavioral practice
- Parental depression (CES-D)

FUNCTIONING MODEL

- Overall model predicts functioning at post (p < 0.001)
- $R^2 = 0.45$

PROCESS-OUTCOME FINDINGS

- Behavioral practice effects (p = 0.001)
- *Stepwise* $R^2 = 0.06$

Lesson 5: Content

- 5. Practice steps on the Master Plan in-session
 - Calibration with repetition
 - In session practice should comprise 60-70% of session time
 - Use three step framework on Youth Lesson webpage to bring structure and predictability to all of the practices
 - Plan it out
 - Get a stress rating and discuss expectations
 - **■** Do it and debrief
 - What did they feel during and after?
 - What did they learn?
 - Try again
 - Can repeat same step, with / without adjustment
 - May move on to a new step if time to debrief

Lesson 5: Role play plan practice



Step 1

Plan it out

Defore you start, talk through exactly how the praetice will work.

- . What are you going to try?
- · Planthe details.
- · Howlong?
- · Any props or materials?
- · People to play a part?
- · What's your stress rating before?
- . What do you expect will happen?

Step 2

Do it and debrief.

Go for it! After you finish, discuss these questions with your therapist.

- How do you feel?
- . How did you feel during?
- . How do you feel now?
- What did you learn?
- . Was it easier or harder than you expected it would be?
- . Were you suprised that you were able to do it?

Step 3

Try again!



Social anxiety for Mateo (texting friend, role play feedback from teacher)



Separation anxiety for Angie (turning off phone, leaving room / house)



Fun activity linking to consistent habit (watching dog video ? regularly walking dog)



Other requests? Try it yourself?

Lesson 5: Content

- 6. Planning for next session
 - Specific steps planned for next session to follow-up progress
- 7. Assign homework / communicate to parent
 - Mood monitoring
 - o Problem solving?
 - o Relaxation?
 - Must include between-session Master Plan practice
 - Repeating the in-session practice on your own
 - Trying a new step planned in session
 - Prepping / bringing things for next session
 - <u>Multiple</u> opportunities for practice planned
 - Coordinate with parents as needed
- 8. Complete *Therapist Reflection exercise* for consultation call

Lesson 5: Therapist reflection

- What are treatment targets/goals? (Have they changed?)
- Will goals be combined or separate? (Has this changed?)
- Items on Master Plan? Anything not yet addressed?
- What were in session approach exercises? What's next?
- What will you need for next session?
- Difficulties with timing, motivation, negotiation of demonstration?
- For simulated approach in session, role plays or other practice?
- Anything need to be addressed in next session?
- For next session:
 - Where will you start?
 - What materials/props? Who's bringing them?
 - Amount of parental involvement?
 - Timing of session?

Lesson 5: Challenges in engagement

What if we can't think of any steps?

- Review mood monitoring or symptoms assessment
- See Implementation Index for full examples (last resort)
- Case consultation calls

What if kid refuses?

- Can use their big goals or what they've told you before to encourage them
- Negotiate or provide 2 options, or ask them to select something they think is a little hard but doable

What if the parent is not sufficiently engaged?

- Make sure to email the "Lesson Summary" to parents each session
- Busy schedule or work and can't attend? Try brief check-ins after sessions
- Not doing what is agreed upon? Try to "pinpoint the problem"
- Not seeing the value of the program? Their own mental health?

What if we have a slow start or feel rushed at the end?

- Be alert to avoidance behavior in early tasks
- Don't start a hard or new step with only 5-10 minutes left
- We want them to leave session feeling confident and proud of their work

Lesson 5:

Challenges in calibration

What if a step was too easy?

- Some youth have a lot of anticipatory avoidance
- May need to re-rate steps after first few practices

What if a step was too hard?

- Useful and important information!
- Easier to deal with than steps that are too easy
- Break down step into sub-steps
- Change in vivo experiences to imaginal or role play
- Do not just abandon the step this reinforces avoidance

What if we have big jumps in the Master Plan?

- Try to fill out the middle of the Plan so that there are not big gaps between easy and hard steps
- You can create medium steps by making easy steps harder
 - longer, more public, combining them with other steps, etc
- Or by making hard steps easier
 - Shorter, private, with relaxation / coping skills, having the therapist model
- Also review mood monitoring for mid-range events that have occurred that could be turned into plan practice

Lesson 6:
Keeping it going



Lesson 6: Keeping it Going!

- WHAT are the goals of the final lesson
 - To review skills learned
 - To plan for continued practice
 - To think about long-term goals and potential upcoming stressors

- WHY do we do Lesson 6?
 - To consolidate skills
 - To link approach behavior to improved functioning
 - To maintain and continue progress
- HOW do we move through the final lesson?

Flexible Agenda

Variety of possible exercises

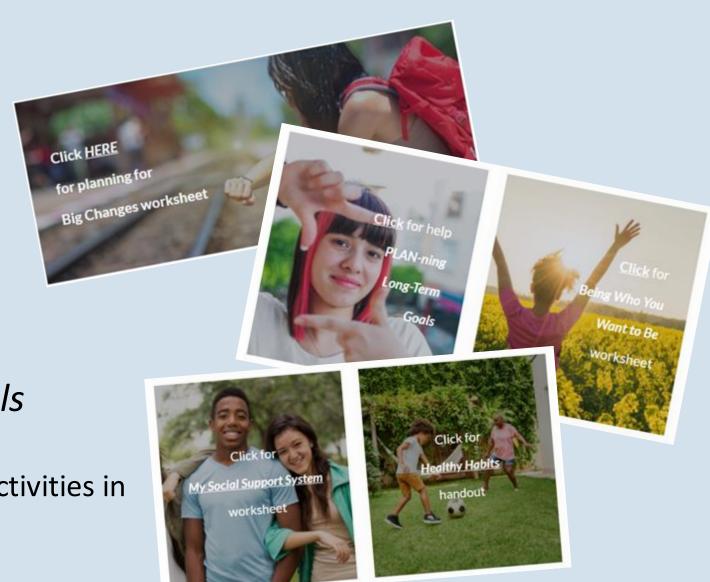
- Relapse prevention
- Resilience building

Match to youth

- May pick subset
- Youth or family choice

Meant to reinforce overall goals

- Not occasion to start new topic
- Natural outgrowth of previous activities in treatment



Three things to remember . . .

 Avoiding problems usually does not make things better.

 Big problems feel easier when we break them into smaller goals.

 We can do the things we need and want to do, even when it feels hard or scary.

Common Questions?

- Working with parents
- Dealing with crises
- Site implementation



Common Questions?

- Working with parents
- Dealing with crises
- Site implementation



What is the role of parents in STEP-UP?



It depends!

- Age?
- Cognitive development?
- Culture?
- Family structure?
- Clinical presentation?

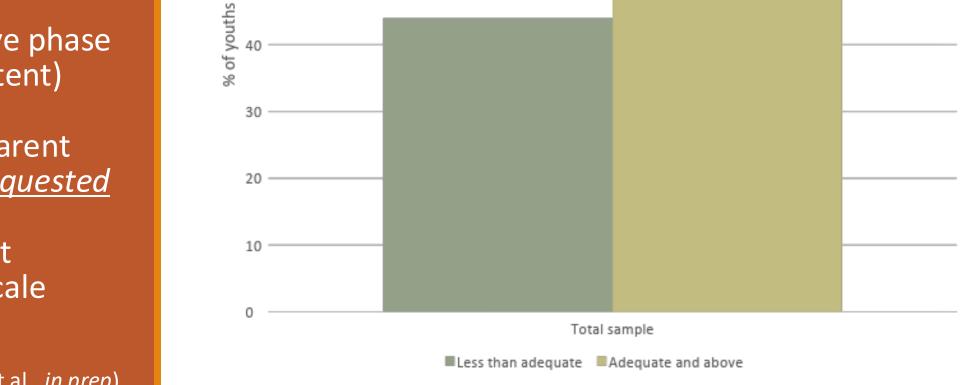


Assessing "adequate" parent engagement

- Single item rated by therapist each session
- Focus on active phase (Lesson 5 content)
- Evaluated if parent engaged <u>as requested</u>
- Mean rating at midpoint of scale

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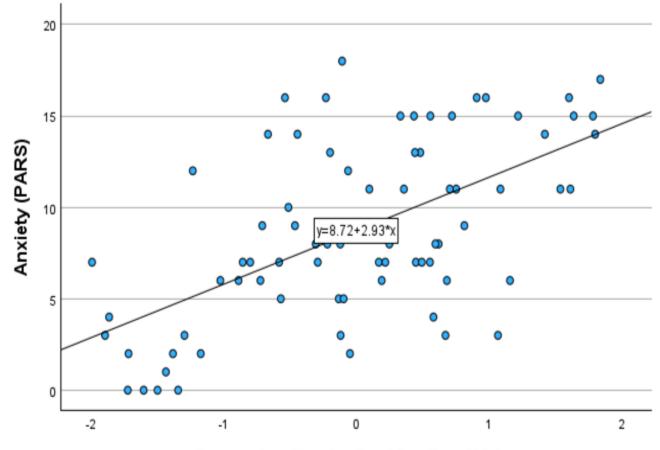


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Therapist rating of adequate parent engagement

(Rodriguez et al., in prep)

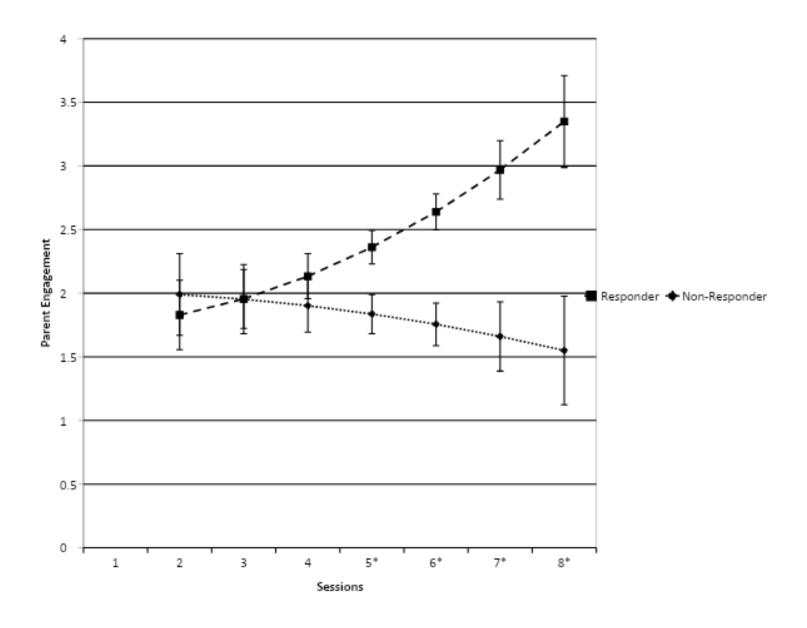
Therapist-rated appropriate engagement was associated with anxiety symptom improvement



Regression Standardized Predicted Value

- Overall model predicts anxiety at post (p < 0.001)
- $R^2 = 0.35$
- Parent engagement effects (p = 0.001)
- *Stepwise* $R^2 = 0.11$

Poor engagement may be an early warning sign of poor outcomes



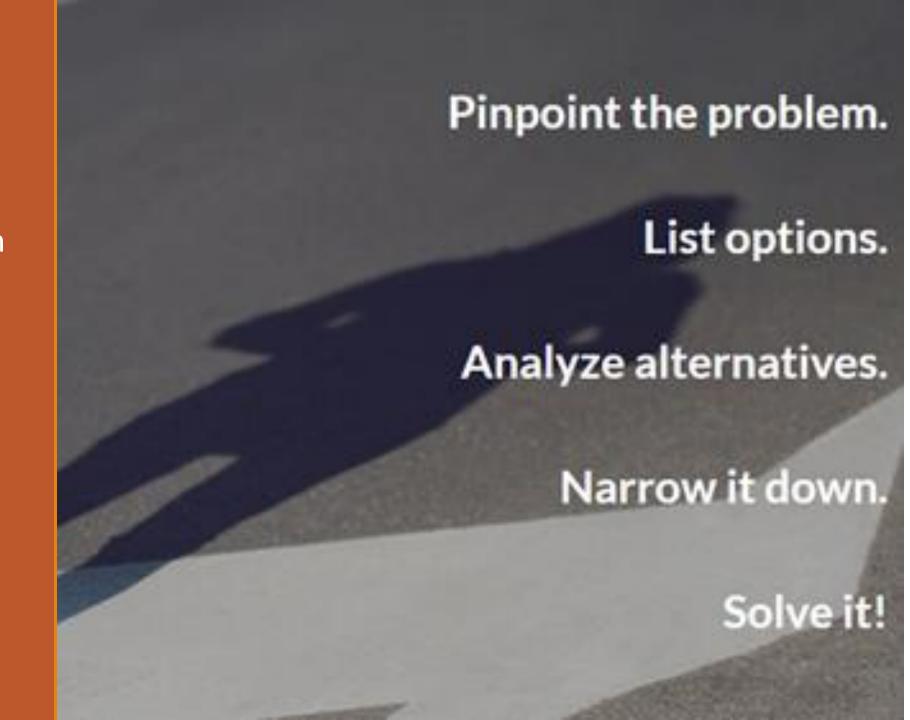
Common Questions?

- Working with parents
- Dealing with crises
- Site implementation



PLANS as a crisis tool

- Evaluate if crisis is related to Master Plan
- If so, problem solving can help integrate crisis management into plan practice
- If not, PLANS may be able to be assigned as homework at a good "off-ramp"
- Safety first!



Common Questions?

- Working with parents
- Dealing with crises
- Site implementation



Consultation Call

Purpose

- Create a professional learning community
- Coordinate STEP-UP site implementation

Format

- Biweekly after the first month
- 50 minutes
- Group-based learning

Agenda

- Active case review
- Planning next sessions
- Role play / additional learning
- Recruitment and referral
- Case flow and workload

