Disclosures

Neither I nor my spouse have, nor have had in the past 12 months, a financial relationship with manufacturers of products or providers of services or with any medically related commercial interests relevant to this planned educational activity.

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Anxiety

- Phobias
- OCD
- Panic
- Agoraphobia
- Separation
- Social
- Generalized
Lifetime Prevalence 28.8%
75% Onset before age 21
Median onset age 11

Kessler et al, Archives of General Psychiatry, 2005
Well-Established Treatments for Childhood Anxiety Disorders

Cognitive-Behavioral Therapy

Medication
Current Treatments Efficacious in Approximately 50% of Cases
Does Involving Parents Benefit Outcomes?

Most studies have not found that parent involvement benefits child anxiety outcomes relative to CBT alone.
Parents Are Attuned To Child Fear Cues
Family Accommodation

Participation
- Answer repeated questions
- Sleep near child
- Perform checks

Modification
- Return early from work
- Drive special routes
- Maintain rigid schedules
Family Accommodation

Present in ~95% of parents of anxious children (especially mothers)
Shimshoni et al., 2019; Benito et al., 2015; Storch et al, 2015

Associated with more severe anxiety symptoms
Norman et al, 2014; Lebowitz, et al., 2016

Associated with more severe impairment for child and family
Thompson–Hollands et al., 2014

Predicts poor treatment outcome
Kagan et al., 2016; Turner, et al., 2017

Leads to additional problems (e.g., sleep related problems)
Lebowitz & Shimshoni, 2019
Child scanned twice: with mother present and when mother is absent
Family Accommodation and mPFC Activation in Clinically Anxious Children

More activation in parent’s absence  
More activation in parent’s presence

\[ r = 0.584, \ p = 0.014 \]
Oxytocin

The only Oxytocin Nasal Spray on Amazon that contains real Oxytocin

Other brands only contain ingredients they believe to accelerate Oxytocin but do not actually contain any Oxytocin

10 IU of Oxytocin in each spray
Lower Salivary Oxytocin in Youth With Separation Anxiety

\[ t = 2.61, \ p < 0.01 \]
After Mother-Child Interaction

No significant difference
Supportive Parenting for Anxious Childhood Emotions

Increase Support

Decrease Accommodation
Support

Acceptance Validation + Confidence = Support
Session Modules

- Recruiting support from outside the home
- Dealing with Disruptive Responses
- Dealing with Threats of Self Harm
- Improving Collaboration Between Parents
Assessed for eligibility (n=259)

Excluded (n=135)
- Not meeting inclusion criteria (n=86)
- Declined to participate (n=29)
- Other reasons (n=20)

Randomized (n=124)

Allocation

Allocated to CBT (n=60) Allocated to SPACE (n=64)
Response and Remission

- Response (PARS):
  - CBT: [Value]
  - SPACE: [Value]

- Remission:
  - CBT: [Value]
  - SPACE: [Value]
Secondary Outcomes

Clinician独立评估者 PARS
Parent 家长评 MASC
Child 孩子评 MASC

Independent Evaluator PARS
Parent Rated MASC
Child Rated MASC
Comparing Mean Outcomes for SPACE and CBT – Clinician Rated
Comparing Mean Outcomes for SPACE and CBT – Parent Rated
Comparing Mean Outcomes for SPACE and CBT – Child Rated
Summary

- Children respond to anxiety by seeking protection and regulation from caregivers.
- Caregivers respond to child anxiety through family accommodation.
- Family accommodation maintains child anxiety over time.
- Reducing family accommodation leads to improved child anxiety.
- SPACE is an efficacious parent-based treatment for child anxiety.
- SPACE increases supportive parental responses and reduces family accommodation.
Future Directions and Next Steps

• Additional clinical trials of SPACE are required and underway
• Studying family accommodation in other childhood disorders (mood, behavior, eating, autism)
• SPACE-ARFID is an adaptation of SPACE for childhood ARFID / picky eating
• Applying principles of SPACE to highly dependent adult children (‘Failure to Launch’)
• Studying SPACE in children with autism and anxiety
Thank You

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Thank You

To learn more about SPACE and training workshops visit:

www.spacetreatment.net