

# ***The CALM Program: PCIT Adaptation for Anxiety Disorders in Early Childhood***

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# The CALM Program

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- Adaptation of both Eyberg's PCIT for children with behavioral problems and Pincus' PCIT for separation anxiety
- Designed for use with children ages 2-7 with:
  - Social anxiety
  - Specific phobia
  - Excessive worry
  - Separation anxiety

# **The CALM Program**

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CALM Program stands for:

**C** oaching

**A** pproach behavior and

**L** eading by

**M** odeling

# Session-by-Session Outline (Research Protocol)

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- Sessions 1-2: Anxiety psychoeducation and CDI Teach Sessions
- Sessions 3-4: CDI Coach Sessions
- Sessions 5-6: CDI Coach/Exposure Sessions
- Session 7: DADS Teach Session
- Sessions 8-12: DADS Coach/Exposure Sessions

# **Anxiety Psychoeducation/CDI Teach Sessions**

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- Parents only
- Educates parents about anxiety; parents and therapist identify parent behaviors that may maintain anxiety
- Parents and therapist develop exposure hierarchy
- Parents learn and role-play CDI skills

## **Child-Directed Interaction (CDI)**

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- The first portion of both traditional PCIT and CALM
- Teaches parents positive attending and active ignoring skills that sets foundation for later exposure work
- Introduction of low-level exposures during CDI portion of treatment

## **“DADS” Portion of Treatment**

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- Parents learn more directive strategies for guiding children in facing feared situations
- Introduction of the DADS Steps in Teach Session

# **DADS Steps**

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- Used to guide exposures to feared situations
- DADS stands for:
  - **D**escribe feared situation
  - **A**pproach feared situation (modeling)
  - **D**irect command for child to approach
  - **S**tate intent to remain in situation and provide selective attention



## **D – Describe the situation**

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- Parent makes at least three statements describing the feared situation for the child
- Statements should describe the situation, not the child's reaction
- Example: Unfamiliar person
  - “A woman came into the room.”
  - “She is wearing a red sweater.”
  - “She is sitting close to where we are playing.”

## **A – Approach the Situation**

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- Parent approaches the feared situation
- Models “brave behavior” and demonstrates that parent is coping with the situation



## D - Direct Command

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- Parent gives child a direct command to engage in feared situation
- Direct command given only once
- Should explain precisely what the parents would like the child to do
  - “**Please say Hello to Irene**”, not “Please talk with Irene”
  - “**Please go in and get your blanket**”, not “Please go in the dark room”

## **S –Selectively attend to child behavior**

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- If child does not follow direct command after 5 seconds, parent states intent to remain in situation
- Parent then attends selectively to child's approach behaviors and actively ignores all other behaviors
- Parent remains in situation until child follows direct command

# DADS Steps Sequence

Child faced with feared situation; Parent announces feared object/situation:

“You’ve been very brave over the last few weeks. Now we will practice playing (with the lights on lower, with someone we don’t know in the room, etc.)”

**DESCRIBE** Parent makes at least three descriptive statements about the situation.

“That person is sitting quietly.”  
“She is wearing a red shirt.”  
“She is smiling.”

**APPROACH** Parent approaches feared situation and continues to describe feared object/situation.

**DIRECT COMMAND** Parent provides ONE direct command for child to approach feared situation.

**SELECTIVE ATTENTION** Parent says, “I will **continue playing (with this person, with the lights turned low, etc).**”  
Parent keeps playing, attends positively to any child approach behavior and ignores all other behavior.

## **DADS Coach Sessions**

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- Parents guide children in *in vivo* exposures while therapist observes and coaches
- Child moves gradually up the exposure hierarchy
- Daily out-of-session DADS practice assigned to parents

# **CALM Program Pilot Study**

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- Open trial assessing preliminary efficacy and feasibility of the CALM Program
- Participants completed treatment and pre- and post-tx assessments
- Double baseline assessment; interval between assessments randomized
  - 1 week interval (n=1)
  - 2 week interval (n=3)
  - 4 week interval (n=3)

# Assessment

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- **Baseline I**
  - Parent ADIS, early childhood adaptation
  - Parent-report forms
- **Baseline II**
  - Behavioral Observations (DPICS, threat conditions)
  - Confirmation of diagnosis
- **Post-Treatment**
  - Parent ADIS, early childhood adaptation
  - Behavioral Observations (DPICS, threat conditions)
  - Parent-report forms



# Sample Overview

ID	Gender	Age	Baseline Interval	Principal Diagnosis
1	Male	4	2 weeks	Separation AD (4)
2	Female	4	4 weeks	Social AD (5)
3	Female	5	4 weeks	Social AD (6)
4	Male	8	1 week	Specific Phobia (6)
5	Male	5	2 weeks	Separation AD (6)
6	Female	6	4 weeks	Social AD (7)
7	Female	5	2 weeks	Separation AD (6)

# Outcomes for All Diagnoses

ID	Pre-tx Diagnoses (CSR, 0-8)	Post-tx Diagnoses (CSR, 0-8)
1	Separation AD (4)	--
2	Social AD (5) Separation AD (4)	--
3	Social AD (6) GAD (5) Separation AD (5)	--
4	Specific Phobia (6)	Specific Phobia (4)
5	Separation AD (6)	--
6	Social AD (7) ODD (5) School Refusal (4) Sel. Mutism (4)	--
7	Separation AD (6) School Refusal (4)	--

# Summary of Outcomes

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- All 7 participants showed improvements in:
  - Clinical severity of their *principal* diagnosis
  - Clinical severity of *all* diagnoses present at pre-treatment
  - Global functioning
  - Global impairments
- At post-tx, 6 of 7 did not meet diagnostic criteria for pre-tx principal diagnosis

## Summary of Outcomes (continued...)

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- At post-treatment, all participants classified as '*minimally*,' '*much*,' or '*very much improved*'
- The average post-tx CGAS score (82.1) falls within the category of:  
80-90: '*No more than slight impairments in functioning at home, at school, or with peers*'

# PCIT-CALM

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- Merging of Pincus' PCIT for separation anxiety with the CALM program (Puliafico, Comer & Albano, 2012)
- Intended to treat range of anxiety disorders in young children, including:
  - Separation anxiety disorder
  - Social phobia
  - Generalized anxiety disorder
  - Specific phobia

# Proposed PCIT-CALM Protocol Outline

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