

A Scoping Review Examining Treatment Components of **School-Based Anxiety and Test Anxiety Interventions**

Lindsay Pittman, Colin B. King and Shelby Federman, Faculty of Education Western University | London, ON, Canada

INTRODUCTION

Background

- Anxiety is the leading mental health concern among children and youth in Canada (Canadian Mental Health Association, 2016).
- Schools represent a valuable opportunity for providing mental health support for children (SMHO, 2023).

Anxiety can contribute to:

 Challenges focusing, presenting in front of peers, writing exams, and school refusal behaviours (Langley et al., 2004; Nail et al., 2015).

Test anxiety can contribute to:

- Exam performance not accurately reflecting demonstrated knowledge.
- Difficulties across several school subjects and a decreased selfperception of academic success (Robson et al., 2023).

Research Gaps

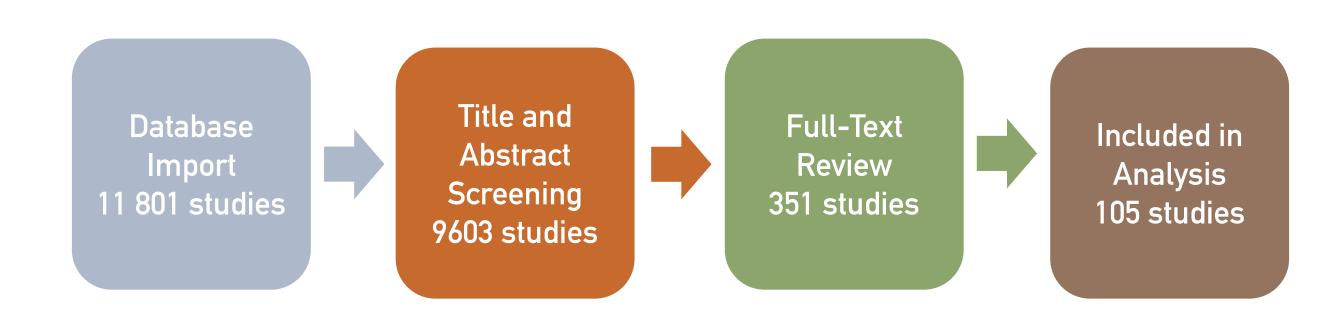
- Previous reviews provide minimal information on the active "ingredients" that make up anxiety interventions.
- Need to examine implementation and sustainability factors of schoolbased interventions.

RESEARCH QUESTIONS

- What treatment elements are included in school-based interventions targeting anxiety or test anxiety?
- 2. To what extent is feasibility included in evaluations of school-based anxiety and test anxiety interventions?

METHODS

Search conducted across five databases: APA PsycInfo, Medline, ERIC, Education Database, Cochrane Library



Data Extraction

Information Type	Data Items
General Information (Arksey & O'Malley, 2005; Erhardt, 2019)	(a) authors (b) publication year (c) number of participants (d) participant ages and/or grade (e) full classroom or small group intervention (f) additional screening for test anxiety or anxiety (g) number of sessions (h) duration of sessions (i) interventionist type (j) intervention type
Treatment Components (Velting et al., 2004)	CBT-based interventions: (a) psychoeducation (b) somatic management (c) cognitive restructuring (d) problem solving (e) exposure (f) relapse prevention
	Other intervention types: no predetermined coding method used
Feasibility Dimensions (Gadke et al., 2021)	(a) Social validity/acceptability (b) practicality (c) integration (d) adaptability (e) implementation

RESULTS

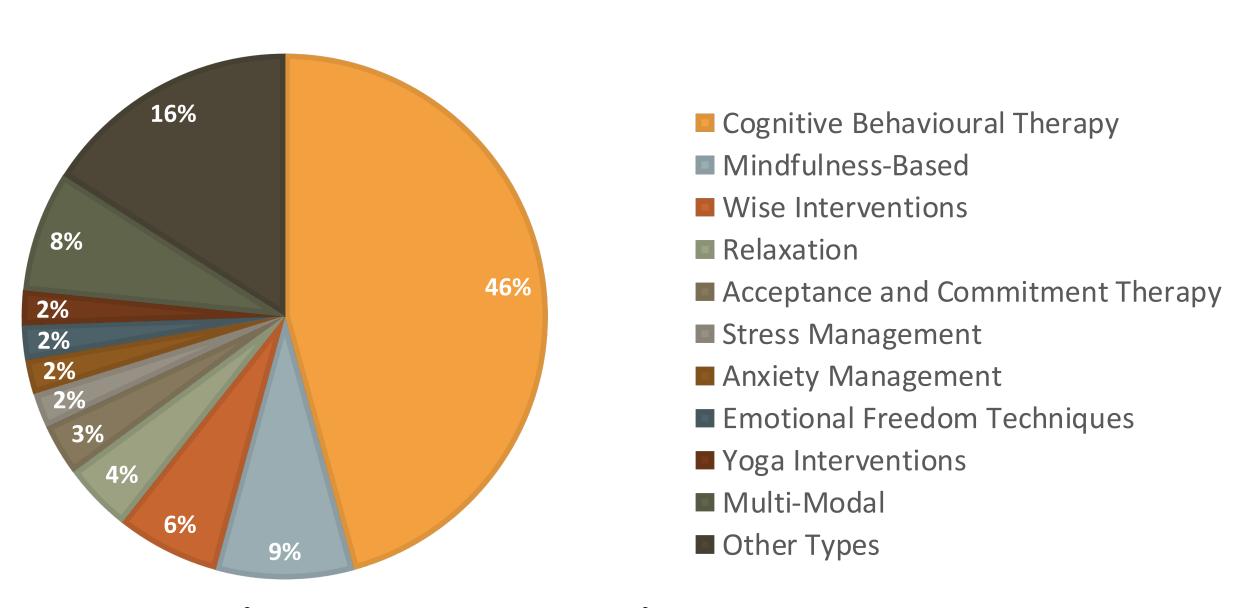
Study Characteristics

	Anxiety	Test Anxiety
Number of Studies	80	25
Number of Interventions	95	34
Participant Number	23 722	2040
Participant Age	8-19	8-18
Participant Grade	1-13	3-12

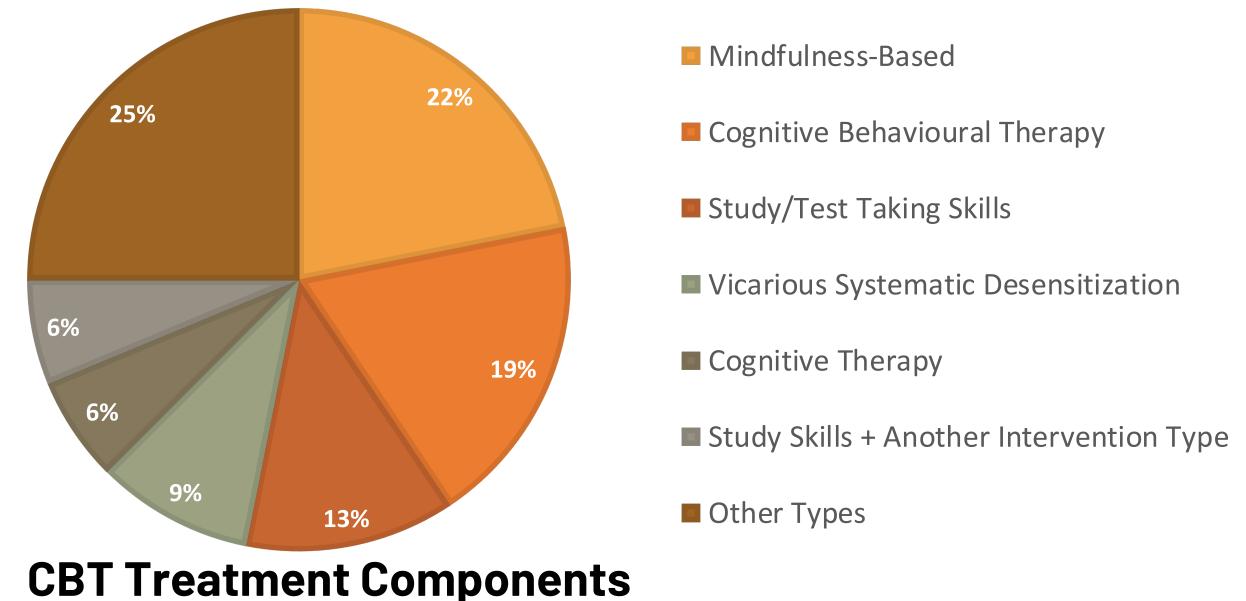
Intervention Characteristics

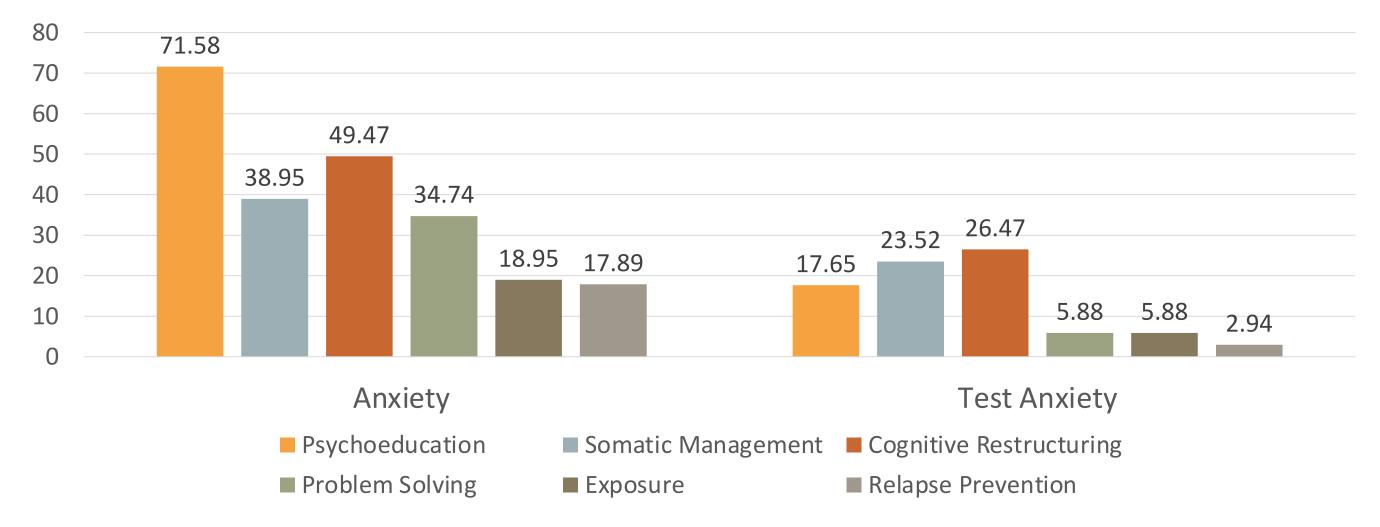
- Class vs. small group based
- Additional screening for anxiety or test anxiety
- Intervention duration
- Number of sessions
- Teacher or student teacher facilitator/co-facilitator

Intervention Type: Anxiety



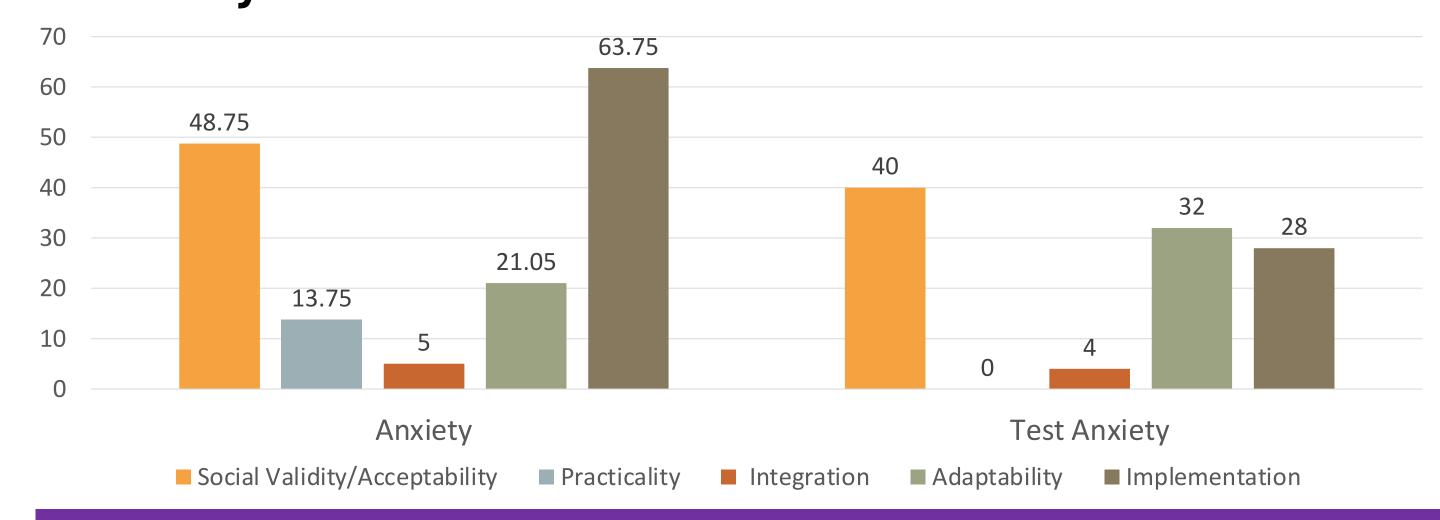
Intervention Type: Test Anxiety





RESULTS/CONT.

Feasibility Dimensions



DISCUSSION

School-Based Interventions Targeting Anxiety

Intervention Type & Interventionist Type

- Variability across intervention types and treatment components.
- CBT-based interventions occurred frequently though not the majority.
- Few interventions included teachers as an interventionist or cointerventionist.

Treatment Components

- Many CBT interventions incorporated several core components.
- Interpersonal elements emerged: assertiveness skills training, communication skills, interpersonal skills, and conflict resolution.

School-Based Interventions Targeting Test Anxiety

Intervention Type & Interventionist Type

- Mindfulness based and CBT were nearly identical in terms of frequency.
- Very few interventions delivered by teachers.

Treatment Components

Cognitive restructuring and somatic management were most common.

Feasibility

 Feasibility is being considered in intervention evaluations, however more studies should consider feasibility across intervention evaluations.

Implications

- Offers an overview of interventions providing a basis for future research.
- Suggests some feasibility dimensions can be readily integrated into empirical investigations.
- First step in helping teachers focus on specific elements perceived to be beneficial for their unique class or to supplement the current curriculum.

ACKNOWLEDGEMENTS

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KEY REFERENCES

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